Results of VDSS Prevention Survey

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NOTE TO READER: THE NUMBER OF RESPONDENTS IN THE ACOMPANYING TABLES REPRESENTS THE NUMBER OF LOCAL AGENCIES RESPONDING RATHER THAN THE NUMBER OF INDIVIDUALS.

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TABLE 1: SURVEY RESPONDENTS BY REGION

Region Name	Freq.	Percent	Cum.
Central	25	21.93	21.93
Eastern	22	19.30	41.23
Northern	24	21.05	62.28
Piedmont	23	20.18	82.46
Western	20	17.54	100.00
	+		
Total	114	100.00	

TABLE 2: SURVEY RESPONDENTS BY AGENCY CLASS SIZE

Agency Class	 		
	Freq.	Percent	Cum.
1 2 3	3 30 81	2.63 26.32 71.05	2.63 28.95 100.00
Total	+ 114	100.00	

EARLY UNIVERSAL PREVENTION SERVICES

TABLE 3: EARLY PREVENTION SERVICES PROVIDED BY LDSS TO GENERAL PUBLIC (Q1)

Do you provide prevention services to general	 		
public?	Freq.	Percent	Cum.
Yes No	84 30	73.68 26.32	73.68
Total	114	100.00	

TABLE 4: EARLY PREVENTION SERVICES PROVIDED BY LDSS TO GENERAL PUBLIC BY REGION (Q1)

Region Name	Do you pr prevention to general Yes	services	Total
Central	16 64.00	9 36.00	25
Eastern	21 95.45	1 4.55	22
Northern	18 75.00	6 25.00	24
Piedmont	16 69.57	7	23
Western	13 65.00	7 35.00	20
Total	84 73.68	30 26.32	114 100.00

TABLE 5: EARLY PREVENTION SERVICES PROVIDED BY LDSS TO GENERAL PUBLIC BY AGENCY CLASS SIZE (Q1)

Agency Class - 2009	•	services	Total
1	3	0.00	3 100.00
2	19 63.33	11 36.67	30
3	62 76.54	19 23.46	81
Total	84 73.68	30 26.32	114 100.00

TABLE 6: UNIVERSAL EARLY PREVENTION SERVICES PROVIDED DIRECTLY BY THE AGENCY (Q1A1 - Q1A14)

		Percent of
		Respondents
Service	Number	(n=84)
Providing info on available services to general public	71	84.52
Training to community-based organizations	71	84.52
Public speaking	70	83.33
Info and referral	66	78.57
Community collaboration	61	72.62
Distribution of parent education/child dev materials to groups	57	67.86
Community activities during CA Prevention month	56	66.67
Attendance at Hugs and Kisses performances	52	61.90
Distribution of materials to children	30	35.71
Public service announcements	26	30.95
Parent training	20	23.81
Other public education and awareness efforts	20	23.81
Parent education groups	14	16.67
Parent support groups	6	7.14

TABLE 7: UNIVERSAL EARLY PREVENTION SERVICES PROVIDED DIRECTLY BY THE AGENCY BY REGION (Q1A1 - Q1A14)

+-		+
	Key	
-		
	frequency of responses	
	column percent of cases	
+-		+

	Central	Eastern	Region Name Northern	Piedmont	Western	Total
Providing info on available sv	12 75.00	20 95.24	15 83.33	14 87.50	10 76.92	
Training to community-based or	15 93.75	18 85.71	16 88.89	12 75.00	10 76.92	
Public speaking	14 87.50	18 85.71	16 88.89	12 75.00	10 76.92	•
Info and referral	15 93.75	16 76.19	14 77.78	11 68.75	10 76.92	•
Community collaboration	11 68.75	15 71.43	17 94.44	8 50.00	10 76.92	
Distribution of parent ed/chil	13 81.25	15 71.43	13 72.22	8 50.00	8 61.54	•
Community activities during CA	11 68.75	18 85.71	11 61.11	8 50.00	8 61.54	
Attendance at Hugs and Kisses	14 87.50	15 71.43	11 61.11	9 56.25	3 23.08	
Distribution of materials to c	8 50.00	8 38.10	5 27.78	7 43.75	2 15.38	
Public service announcements	5 31.25	7 33.33	6 33.33	5 31.25	3 23.08	•
Parent training	4 25.00	6 28.57	7 38.89	2 12.50	1 7.69	
Other public education and awa	3 18.75	7 33.33	5 27.78	4 25.00	1 7.69	•
Parent education groups	2 12.50	7 33.33	5 27.78	0.00	0.00	
Parent support groups	2 12.50	2 9.52	2 11.11	0.00	0.00	
Total Cases	129 16	172 21	143 18	100 16	76 13	

TABLE 8: UNIVERSAL EARLY PREVENTION SERVICES PROVIDED DIRECTLY BY THE AGENCY BY AGENCY CLASS SIZE (Q1A1 - Q1A14)

+-		+
İ	Key	
-		
	frequency of responses	
	column percent of cases	
+-		+

	Agen	cy Class - 2	2009	
	1	2	3	Total
Providing info on available sv	+ I 3	16	52	+ 71
	100.00	84.21	83.87	•
Training to community-based or	+ I 3	 16	 52	+ I 71
realizing to community based or	100.00			•
Dublic marks	+			+
Public speaking	2 66.67	15 78.95	53 85.48	70 83.33
	+			+
Info and referral	2 66.67	18 94.74	46 74.19	
	+			+
Community collaboration		13	48	61
	0.00 +	68.42	77.42	72.62 +
Distribution of parent ed/chil		16	39	
	66.67 +	84.21	62.90	67.86
Community activities during CA	2	11	43	56
	66.67	57.89	69.35	66.67
Attendance at Hugs and Kisses	2	13	37	52
2	66.67	68.42	59.68	61.90
Distribution of materials to c	+ 1	 9	20	+ I 30
programmed massiful to the	33.33	47.37	32.26	•
Public service announcements	+ 1	4	21	+ I 26
rubite service announcements	33.33	21.05	33.87	
Broad by tales	+			+
Parent training	0.00	4 21.05	16 25.81	
	+			+
Other public education and awa	0.00	10.53	18 29.03	
	+		29.03	+
Parent education groups		1	13	
	0.00 +	5.26 	20.97	16.67
Parent support groups		1	5	
	0.00	5.26	8.06	7.14
Total	18	139	463	620
Cases	3	19	62	84

TABLE 9: LIST OF OTHER UNIVERSAL EARLY PREVENTION SERVICES P	PROVIDED DIRECTLY BY THE AGENCY (01A TEXT)
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Child Care Quality Program

Family Fun Day

parenting information on our web page

presentations at Community and Church activities

in service training with teachers

child safe with the police department

Substance Abuse Community Forums

Annual Celebrating Children Fair

Child Abuse Prevention Poker Run

community speaking, handouts, packets

Supervision guidelines on county website

collaborate with CHIP

Classes offered on topics such as budgeting

providing pamphlets and information re: parenting and services to community centers, churches and libraries

news paper articles

health fairs, community festival info booths

Operate Richmond Home Visiting Referral Center; Play two hour looping parenting education DVDs in local DSS waiting rooms; GRTC bus campaign; Display tables at community fairs and other outreach events; Program promoted on DSS-ECDI webpage; Parenting programs posted in SCAN FAM web calendar

Shaken Babies Awareness group

Awareness Fair/Walks

Kinship Care Information including Kinship Care Conference.

TABLE 10: STAFF WHO PROVIDE UNIVERSAL PREVENTION SERVICES TO THE GENERAL PUBLIC (Q1B1-Q1B9)

		Percent of Respondents
Worker Type	Number	(n=84)
CPS investigative worker	64	76.19
CPS on-going worker	54	64.29
Intake worker	51	60.71
Foster care worker	50	59.52
CPS family assessment worker	49	58.33
Other worker	40	47.62
Generic worker	36	42.86
Staff devoted primarily to prevention	34	40.48
Adoption worker	29	34.52

TABLE 11: STAFF WHO PROVIDE UNIVERSAL PREVENTION SERVICES TO THE GENERAL PUBLIC BY REGION (Q1B1-Q1B9)

+-		+
	Key	
-		
	frequency of responses	
	column percent of cases	
+-		+

	Central		Region Name Northern	Piedmont	Western	Total
CPS investigative worker			14 77.78	12 75.00	10 76.92	64 76.19
CPS on-going worker					9 69.23	
Intake worker		10 47.62		11 68.75		51 60.71
Foster care worker			10 55.56		9 69.23	
CPS family assessment worker				-	7 53.85	
Other worker				5 31.25	8 61.54	
Generic worker					4 30.77	
Staff devoted primarily to pre					3 23.08	
Adoption worker					6 46.15	
Total Cases		102 21	94 18		63 13	407 84

TABLE 12: STAFF WHO PROVIDE UNIVERSAL PREVENTION SERVICES TO THE GENERAL PUBLIC BY AGENCY CLASS SIZE (Q1B1-Q1B9)

+-		+
	Key	
-		I
	frequency of responses	
	column percent of cases	
+-		+

	Agen	cy Class - 2 2	3	Total
CPS investigative worker		11 57.89	53 85.48	
CPS on-going worker	0.00		46 74.19	
Intake worker		4 21.05	47 75.81	
Foster care worker	0.00			
CPS family assessment worker	0.00	7 36.84	42 67.74	•
Other worker	•	7 36.84	00	
Generic worker	3 100.00	15 78.95	18 29.03	
Staff devoted primarily to pre	0 0.00	3 15.79	~ -	
Adoption worker	0.00	3 15.79	26 41.94	
Total Cases	3 3	66 19	338 62	

TABLE 13: AGENCIES WHO USE STAFF DEVOTED PRIMARILY TO PREVENTION (Q1B2)
Alexandria
Buckingham
Carroll
Charlotte
Charlottesville
Culpeper
Danville
Fairfax County/City/Falls Church
Fauquier
Fluvanna
Franklin County
Fredericksburg
Hampton
Isle of Wight
James City
King William
Lee
Loudoun
Louisa
Norfolk
Northampton
Nottoway
Pittsylvania
Powhatan
Prince William
Richmond City
Roanoke City
Smyth
Southampton
Stafford
Sussex
Virginia Beach
Winchester
York/Poquoson

TABLE 14: LIST OF AGENCIES WHO USE OTHER WORKERS DEVOTED PRIMARILY TO PREVENTION (Q1B9)
Albemarle
Arlington
Augusta/Staunton/Waynesboro
Bristol
Campbell
Carroll
Chesapeake
Chesterfield/Colonial Heights
Essex
Franklin County
Giles
Gloucester
Hampton
Henrico
James City
Louisa
Manassas
Manassas Park
Mathews
Middlesex
Montgomery
Newport News
Northumberland
Norton
Page
Prince William
Pulaski
Richmond City
Roanoke County/Salem
Rockingham/Harrisonburg
Russell
Scott
Southampton
Spotsylvania
Stafford
Surry
Westmoreland
Williamsburg
Winchester
York/Poquoson

TABLE 15: LIST OF STAFF WHO PROVIDE UNIVERSAL PREVENTION SERVICES TO THE GENERAL PUBLIC (Q1B_TEXT)
CPS Supervisor, Family Support Worker
MH staff
CPS Supervisor
Child Care Worker
Training Specialist
Social Work Aide and Interns
CPS, Foster Care and Adoption Supervisors
VIEW Sr. Social Worker & Child Care Staff
Social Work Case Aid
HSA, supervisor
Social Work Supervisor or Agency Director
SW Supervisors; Director, Benefits Staff , Family Svc Worker
supervisory and managerial staff
CPS Supervisor
Social Work Assistants
supervisor
Program Manager
CSA and Adult Services Child Care Worker
Kids Help worker
Director, Office Assistant, VIEW Worker, Eligibility Staff
CPS Supervisor and Assistant Director
Youth Development Specialist/Parenting Education Coordinator
foster parent coordinator
Director, Child Care Worker
Service Supervisor
Associate Social Workers and Human Service Aides
Available staff based on specific task and audience
Benefit Program Staff; Second Responder; Healthy Families; Healthy Start; DSS Early Childhood Development
Initiative staff
CPS Supervisor
F.C. Resource Family Trainer, Assistant Director, CPS supervisors
FAPT
Employment services workers; FC/A and CPS Supervisors
Services Supervisor
Family Educators
foster care and CPS supervisor
SW Supervisor for Child Welfare Services
supervisor and director
Social Work Supervisor and Director
Family Team Meeting Facilitator
Supervisors

TABLE 16: COMMUNITY GROUPS WITH WHOM THE AGENCY COLLABORATES FOR FUNDING AND/OR SERVICES FOR UNIVERSAL PREVENTION (Q1c1-Q1c13)

		Percent of Respondents
Community Groups	Number	(n=84)
Schools	75	89.29
Community based resources	52	61.90
Local CSA	52	61.90
Health department	39	46.43
Local or regional coalitions	37	44.05
Prevent Child Abuse Virginia	31	36.90
Smart Beginnings	23	27.38
Other groups	21	25.00
Home visiting programs	19	22.62
Other physicians and clinics	13	15.48
Foundations and corporations	9	10.71
Parent groups	7	8.33
OB/GYN clinics	3	3.57

TABLE 17: COMMUNITY GROUPS WITH WHOM THE AGENCY COLLABORATES FOR FUNDING AND/OR SERVICES FOR UNIVERSAL PREVENTION BY AGENCY CLASS SIZE (Q1c1-Q1c13)

+
Key
frequency of responses
column percent of cases
+

	Ager	ncy Class - 2	3	Total
Schools	+3 100.00	15 78.95	57 91.94	+ 75 89.29
Community based resources	+ 2 66.67	8 42.11	42 67.74	•
Local CSA	3	10 52.63	39 62.90	52
Health department	1 33.33	5 26.32	33 53.23	•
Local or regional coalitions	1 33.33	6 31.58	30 48.39	•
Prevent Child Abuse Virginia	1 33.33	1 5.26	29 46.77	
Smart Beginnings	1 33.33	3 15.79	19 30.65	23 27.38
Other groups	0.00	4 21.05	17 27.42	21
Home visiting programs	0.00	2 10.53	17 27.42	19 22.62
Other physicians and clinics	1 33.33	3 15.79	9 14.52	13
Foundations and corporations	0.00	2 10.53	7 11.29	9 10.71
Parent groups	0.00	0.00	7 11.29	•
OB/GYN clinics	0.00	1 5.26	2 3.23	
Total Cases	13 3	60 19	308 62	

TABLE 18: LIST OF AGENCIES COLLABORATING WITH LOCAL OR REGIONAL COALITIONS (Q1c3)
Albemarle
Alexandria
Arlington
Bland
Botetourt
Campbel1
Carroll
Charles City
Charlottesville
Chesterfield/Colonial Heights
Culpeper
Dinwiddie
Fairfax County/City/Falls Church
Fauquier
Floyd
Fluvanna
Franklin City
Fredericksburg
Henrico
Isle of Wight
James City
Loudoun
Manassas
Manassas Park
Newport News
Norfolk
Northampton
Northumberland
Prince William
Pulaski
Richmond City
Roanoke County/Salem
Rockingham/Harrisonburg
Spotsylvania
Stafford
Westmoreland
Williamsburg

Table 19: List of agencies that collaborate with foundations and corporations (q1c12)
Culpeper
Floyd
Hampton
Isle of Wight
Mathews
Newport News
Pittsylvania
Sussex
Westmoreland

TABLE 20: LIST OF OTHER COMMUNITY GROUPS PROVIDING UNIVERSAL PREVENTION SERVICES (Q1c_TEXT)
CSB
Child Advocacy Center
DV
nonprofit agencies
GALs, Attorneys, FAP Team
MH/MR/SA
Virginia Cooperative Extension
Healthy Families Partnership; Protect Our Kids
CASA
Local government funding do not partner we are rural
Head start, Lonesome Pine Off. on Youth, ACAA, Sal. Army, OEI
CHIPS
CSA Vendors, Court Services Unit, Virginia Cooperative Extension
Local Hospital Staff
Healthy Families, Child Advocate Center, Crisis Center
Healthy Families of Page County
Healthy Families
Local government
RAM, Presbyterian Center
Jr. Woman's Club
Child Development Resource Center

Table 21: Sources of funding used to provide Early Universal Prevention Services (Q1D1-Q1D7)

		Percent of
		Respondents
Funding Sources	Number	(n=82)
Safe and Stable Families	50	60.98
Community resources	43	52.44
100% Local only funds	34	41.46
Other sources of funding	19	23.17
Grant funding	18	21.95
Community block grants	10	12.20
United Way	8	9.76

TABLE 22: SOURCES OF FUNDING USED TO PROVIDE EARLY UNIVERSAL PREVENTION SERVICES BY REGION (Q1D1-Q1D7)

I		F	Region Name			
I	Central	Eastern	Northern	Piedmont	Western	Total
Safe and Stable Families	10	16	12	7	5	50
	62.50	76.19	66.67	46.67	41.67	60.98
Community resources	7	10	10	8	8	43
	43.75	47.62	55.56	53.33	66.67	52.44
100% Local only funds	10	7	9	5	3	34
	62.50	33.33	50.00	33.33	25.00	41.46
Other sources of funding	2	8	2	2	5	19
	12.50	38.10	11.11	13.33	41.67	23.17
Grant funding	4	7	3	1	3	18
	25.00	33.33	16.67	6.67	25.00	21.95
Community block grants	2	1	1	5	1	10
	12.50	4.76	5.56	33.33	8.33	12.20
United Way	0.00	3 14.29	2 11.11	3 20.00	0.00	9.76
Total		52	39	31	25	182
Cases		21	18	15	12	82

Table 23: Sources of funding used to provide Early Universal Prevention Services by Agency Class Size (Q1D1-Q1D7)

+-		+
	Key	
-		
	frequency of responses	
	column percent of cases	
+-		+

	Agen	cy Class - 2		
	1 +	2 	3	Total
Safe and Stable Families	0.00		38 63.33	60.98
Community resources	1	10	32 53.33	1 43
100% Local only funds		9 47.37	24 40.00	
Other sources of funding			17 28.33	19 23.17
Grant funding			16 26.67	21.95
Community block grants		4 21.05	6	10 12.20
United Way		0.00	8 13.33	8 9.76
Total Cases	'	37 19	141 60	182 82

Table 24: List of agencies using grant funding for universal early prevention services (1d1)
Alexandria
Arlington
Brunswick
Charlottesville
Chesterfield/Colonial Heights
Dinwiddie
Floyd
Fluvanna
Fredericksburg
Hampton
Mathews
Montgomery
Newport News
Richmond City
Smyth
Surry
Sussex
Westmoreland

TABLE 25: LIST OF AGENCIES USING COMMUNITY RESOURCES FOR UNIVERSAL EARLY PREVENTION SERVICES (Q1D6)
Alexandria
Appomattox
Augusta/Staunton/Waynesboro
Botetourt
Bristol
Brunswick
Campbell
Charles City
Charlotte
Chesapeake
Culpeper
Dinwiddie
Fauquier
Floyd
Fluvanna
Franklin City
Fredericksburg
Galax
Giles
Greensville/Emporia
Highland
Isle of Wight
Louisa
Madison
Manassas Park
Middlesex
Northampton
Norton
Nottoway
Page
Pittsylvania
Prince Edward
Prince William
Richmond City
Roanoke City
Russell
Scott
Smyth
Surry
Sussex
Virginia Beach
Westmoreland
Winchester

Table 26: List of agencies using other sources of funding for universal early prevention services (Q1D7)
Accomack
Bath
Bedford County/City
Bland
Bristol
Chesapeake
Chesterfield/Colonial Heights
Fairfax County/City/Falls Church
Fauquier
Gloucester
Hampton
James City
Lee
Montgomery
Richmond City
Scott
Southampton
Sussex
York/Poquoson

TABLE 27: LIST OF GRANT FUNDING TITLE(S) AND SOURCE(S) FOR EARLY UNIVERSAL PREVENTION SERVICES (Q1D GRANT)

not sure but it's through our Child Advocacy Center

VA Child Advocacy Centers

Employment Advancement TANF

Perry Foundation and CCF

Child Care Quality Initiative Funds VDSS via Block Grant

Basic Human Needs

Community Foundation Grant - Community Foundation of the New River Valley; Healthy Communities Action Team

Grants - Floyd County Obesity Prevention Project

QI Child Care

Safe and Stable

Health and Human Services KISS grant; March of Dimes for Welcome Baby project; Prevent Child Abuse Virginia grant; Old Point National Bank grant; Kiwanis by the Bay grant; St. Bernadine Franciscan Sister's grant

Owens Foundation and Mathews Community Foundation

NRV Cares is a private agency in our community that applies for a grant and pays for the plays. MCDSS is not involved in the payment part of the play

VDSS-Division of Family Services-CPS (Virginia Family Violence Prevention Program); VDOH (Engaging Men and Boys-Violence Prevention); Virginia Tobacco Settlement Fund (Virginia Foundation for Healthy Youth)

Emergency Shelter Grant (HUD); Social Services Block Grant (VDSS); Housing Code Enforcement and Counseling Program (HUD); Smart Beginnings Grant (VECF); Smart Beginnings Sustaining Grant (VECF); Family and Children Trust Grant

Safe and Stable Families Program funding

In Part by Grant from Robert Wood Johnson Foundation

Quality Initiative-Child care

Safety Net Funding of Jessie Ball duPont Foundation

Table 28: List of other sources of funding used to provide early universal prevention services (Q1D_text)

CSA

Limited funding available

Other Purchased Services

part of generic worker's position

WE attempt to do our programs with little expense.

Preservation and PIP funds

 ${\tt VIEW}$ program funding from the state

Staff time funded through multiple sources

fund raising with local businesses

Administrative Funds, Preventive Services

Foundations and Local Businesses

None shown on the survey

QI, IV-E, Foster Home Recruitment

Grant funding for Hugs and Kisses play. All other information sessions/trainings are provided by workers and no funds are needed

Independent Living Funds; CPS Preventive Funds (budget line item 824)

Did use BL 824

fundraising

Quality Initiative Funding

York-Poquoson Child Advocacy Team

Email: beth.jones@dss.virginia.gov

TABLE 29: LANGUAGES USED TO PRINT EARLY UNIVERSAL PREVENTION SERVICES MATERIALS FOR GENERAL PUBLIC (Q1E1-Q1E3)

Language	Number	Percent of Respondents (n=84)
English	81	96.43
Spanish	45	53.57
Other languages	4	4.76

TABLE 30: LIST OF AGENCIES THAT PROVIDE MATERIALS IN SPANISH (Q1E2)
Accomack
Albemarle
Alexandria
Amelia
Appomattox
Arlington
Augusta/Staunton/Waynesboro
Botetourt
Brunswick
Campbell
Charlotte
Charlottesville
Chesapeake
Chesterfield/Colonial Heights
Culpeper
Essex
Fauquier
Floyd
Franklin County
Fredericksburg
Giles
Gloucester
Greensville/Emporia
Halifax
Hampton
Henrico
James City
Loudoun
Louisa
Manassas
Manassas Park
Newport News
Norfolk
Northampton
Page Pittsylvania
Prince Edward
Prince William
Roanoke City
Roanoke County/Salem
Smyth
Southampton
Sussex
Virginia Beach
Winchester

TABLE 31: OTHER LANGUAGES USED TO PRINT MATERIALS FOR GENERAL PUBLIC (Q1e_TEXT)

Due to budget cuts, not printing material. Have material from previous years which we use until we run out. do not print materials
we can make other materials available by printing in other languages if requested

TABLE 32: USE OF VOLUNTEERS USED TO PROVIDE EARLY UNIVERSAL PREVENTION SERVICES (Q1f)

Use volunteers	 Freq.	Percent	Cum.
Yes No	25	29.76 70.24	29.76 100.00
Total	84	100.00	

Table 33: List of agencies using volunteers to provide early universal prevention services (Q1f)
Alexandria
Botetourt
Bristol
Brunswick
Campbell
Carroll
Charlotte
Charlottesville
Dinwiddie
Floyd
Hampton
Henrico
James City
Lee
Louisa
Mathews
Newport News
Pittsylvania
Prince Edward
Richmond City
Southampton
Spotsylvania
Surry
Sussex
Virginia Beach

TABLE 34: HOW VOLUNTEERS ARE USED TO PROVIDE EARLY UNIVERSAL PREVENTION SERVICES (Q1G_TEXT)

we have a volunteer coordinator and volunteers are sought through our CAC

Retired School teachers serve as Student Assistance Program Coordinators for the SAP program in the middle schools

To assist with arranging events, public speaking and education.

Facilitators, financial support, transporters

assistance with community events & transportation

Provide them with informational packets and verbal knowledge so they can and dispense them within the community Churches will provide items or services for the family.

Presentations

distribution of materials

Through our community partners. Attend meetings, community forums, community events, handout materials, etc.

Education and training; community engagement

parenting education

Volunteers have served as public speakers and as participants in the annual Child Abuse Prevention Vigil held in April.

Distribution of materials

To interpret in court

volunteers are used to clean our Kids Help Center and they have planted flowers and shrubs on the outside of the Center

facilitate workshops-coordinate events

Internal

We use volunteers from our 2 local colleges in public awareness campaigns

Child Watch; Program Facilitators; Outreach at community fairs; Volunteers provide educational information in their area of expertise to pregnant and teen parents in Foster Care to prevent future CPS ..

fair activities and fund raising and awareness

child care for parenting classes

Transportation, Registration, Set up, Clean up & Community Outreach- passing out flyers, brochures, info

Transportation

Provide information and to assist in completing applications

EARLY PREVENTION SERVICES PROVIDED BY LDSS TO HIGH RISK GROUPS

TABLE 35: PROVISION OF EARLY PREVENTION SERVICES TO HIGH RISK GROUPS (Q2)

Provide early prevention to high risk	 		
groups?	Freq.	Percent	Cum.
Yes No	37 77	32.46 67.54	32.46 100.00
Total	114	100.00	

TABLE 36: PROVISION OF EARLY PREVENTION SERVICES TO HIGH RISK GROUPS BY REGION (Q2)

 Region	Provide early prevention to high risk groups?				
Name	Yes	No	Total		
Central	7 28.00	18 72.00	25 100.00		
Eastern	8 36.36	14 63.64	22		
Northern	12 50.00	12 50.00	24		
Piedmont	4 17.39	19 82.61	23		
Western	6 30.00	14 70.00	20		
Total 	37 32.46	77 67.54	114		

TABLE 37: PROVISION OF EARLY PREVENTION SERVICES TO HIGH RISK GROUPS BY AGENCY CLASS SIZE (Q2)

Agency Class - 2009	•	n to high	Total
1	0.00	3	3 100.00
2	6 20.00	24 80.00	30
3	31 38.27	50 61.73	81
Total	37 32.46	77 67.54	114

Albemarle Campbell Carroll Charlottesville Chesapeake Chesterfield/Colonial Heights Clarke Culpeper Danville Essex Fairfax County/City/Falls Church Fluvanna Fredericksburg Hampton Henrico Isle of Wight King George Lee Loudoun Louisa Madison Mathews Middlesex Montgomery Newport News Norfolk Page Portsmouth Prince Edward Prince Edward Prince Edward Prince William Pulaski Richmond City Russell Stafford Sussex Warren Washington	TABLE 38: LIST OF AGENCIES PROVIDING EARLY PREVENTION SERVICES TO HIGH RISK GROUPS (Q2)
Carroll Charlottesville Chesapeake Chesterfield/Colonial Heights Clarke Culpeper Danville Essex Fairfax County/City/Falls Church Fluvanna Fredericksburg Hampton Henrico Isle of Wight King George Lee Loudoun Louisa Madison Mathews Middlesex Montgomery Newport News Norfolk Page Fortsmouth Prince Edward Prince Edward Prince William Pulaski Risher Risher Pulsek Risher	Albemarle
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Chesapeake Chesterfield/Colonial Heights Clarke Culpeper Danville Essex Fairfax County/City/Falls Church Fluvanna Fredericksburg Hampton Henrico Isle of Wight King George Lee Loudoun Louisa Madison Mathews Middlesex Montgomery Newport News Norfolk Page Portsmouth Prince Edward Prince William Pulaski Richmond City Russell Stafford Sussex Warren	Carroll
Chesterfield/Colonial Heights Clarke Culpeper Danville Essex Fairfax County/City/Falls Church Fluvanna Fredericksburg Hampton Henrico Isle of Wight King George Lee Loudoun Louisa Madison Mathews Middlesex Montgomery Newport News Norfolk Page Portsmouth Prince Edward Prince Edward Prince William Pulaski Richmond City Russell Stafford Sussex Warren	Charlottesville
Clarke Culpeper Danville Essex Fairfax County/City/Falls Church Fluvanna Fredericksburg Hampton Henrico Isle of Wight King George Lee Loudoun Louisa Madison Mathews Middlesex Montgomery Newport News Norfolk Page Portsmouth Prince Edward Prince Edward Prince William Pulaski Richmond City Russell Stafford Sussex Warren	Chesapeake
Culpeper Danville Essex Fairfax County/City/Falls Church Fluvanna Fredericksburg Hampton Henrico Isle of Wight King George Lee Loudoun Louisa Madison Mathews Middlesex Montgomery Newport News Norfolk Page Portsmouth Prince Edward Prince William Pulaski Richmond City Russell Stafford Sussex Warren	Chesterfield/Colonial Heights
Danville Essex Fairfax County/City/Falls Church Fluvanna Fredericksburg Hampton Henrico Isle of Wight King George Lee Loudoun Louisa Madison Mathews Middlesex Montgomery Newport News Norfolk Page Portsmouth Prince Edward Prince Edward Prince William Pulaski Richmond City Russell Stafford Sussex Warren	Clarke
Essex Fairfax County/City/Falls Church Fluvanna Fredericksburg Hampton Henrico Isle of Wight King George Lee Loudoun Louisa Madison Mathews Middlesex Montgomery Newport News Norfolk Page Portsmouth Prince Edward Prince William Pulaski Richmond City Russell Stafford Sussex Warren	Culpeper
Fairfax County/City/Falls Church Fluvanna Fredericksburg Hampton Henrico Isle of Wight King George Lee Loudoun Louisa Madison Mathews Middlesex Montgomery Newport News Norfolk Page Portsmouth Prince Edward Prince William Pulaski Richmond City Russell Stafford Sussex Warren	Danville
Fluvanna Fredericksburg Hampton Henrico Isle of Wight King George Lee Loudoun Louisa Madison Mathews Middlesex Montgomery Newport News Norfolk Page Portsmouth Prince Edward Prince William Pulaski Richmond City Russell Stafford Sussex Warren	Essex
Fredericksburg Hampton Henrico Isle of Wight King George Lee Loudoun Louisa Madison Mathews Middlesex Montgomery Newport News Norfolk Page Portsmouth Prince Edward Prince William Pulaski Richmond City Russell Stafford Sussex Warren	Fairfax County/City/Falls Church
Hampton Henrico Isle of Wight King George Lee Loudoun Louisa Madison Mathews Midlesex Montgomery Newport News Norfolk Page Portsmouth Prince Edward Prince William Pulaski Richmond City Russell Stafford Sussex Warren	Fluvanna
Henrico Isle of Wight King George Lee Loudoun Louisa Madison Mathews Middlesex Montgomery Newport News Norfolk Page Portsmouth Prince Edward Prince William Pulaski Richmond City Russell Stafford Sussex Warren	Fredericksburg
Isle of Wight King George Lee Loudoun Loudoun Madison Mathews Middlesex Montgomery Newport News Norfolk Page Portsmouth Prince Edward Prince William Pulaski Richmond City Russell Stafford Sussex Warren	Hampton
King George Lee Loudoun Louisa Madison Mathews Middlesex Montgomery Newport News Norfolk Page Portsmouth Prince Edward Prince William Pulaski Richmond City Russell Stafford Sussex Warren	Henrico
Lee Loudoun Louisa Madison Mathews Middlesex Montgomery Newport News Norfolk Page Portsmouth Prince Edward Prince William Pulaski Richmond City Russell Stafford Sussex Warren	Isle of Wight
Louisa Madison Mathews Middlesex Montgomery Newport News Norfolk Page Portsmouth Prince Edward Prince William Pulaski Richmond City Russell Stafford Sussex Warren	King George
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Madison Mathews Middlesex Montgomery Newport News Norfolk Page Portsmouth Prince Edward Prince William Pulaski Richmond City Russell Stafford Sussex Warren	
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Prince William Pulaski Richmond City Russell Stafford Sussex Warren	
Pulaski Richmond City Russell Stafford Sussex Warren	
Richmond City Russell Stafford Sussex Warren	
Russell Stafford Sussex Warren	
Stafford Sussex Warren	<u> </u>
Sussex Warren	
Warren	Stafford
	Sussex
Washington	
	Washington

TABLE 39: GROUPS TARGETED FOR EARLY PREVENTION SERVICES (HIGH RISK) (Q2A1-Q2A10)

		Percent of Respondents
Group	Number	(n=37)
Low-income families	25	67.57
Single parents	18	48.65
Fathers	16	43.24
Parenting teens	13	35.14
Parents with disabilities	12	32.43
Parents with children with disabilities	11	29.73
Other targeted groups	11	29.73
Non-English speaking parents	7	18.92
Incarcerated parents	6	16.22
Pregnant teens	6	16.22

TABLE 40: LIST OF OTHER GROUPS TARGETED FOR EARLY PREVENTION SERVICES (Q2A_TEXT)

Parents of school aged children

Families who are subject to family assessment and families where DSS is put on notice of possible placement into foster care due to delinquency

African American families; Relative caregivers; High risk neighborhoods.

All children and families who receive the TANF grant

Teens who have behavior issues in school and are at risk of expulsion or dropping out

Referrals from the court

Email: beth.jones@dss.virginia.gov

Specific parents identified by the Court

Those residing in sub-standard housing; Those who are homeless or at risk of becoming homeless

Parents with children known to the courts

Foster parents

Pregnant women

TABLE 41: GROUPS TARGETED FOR EARLY PREVENTION SERVICES BY REGION (Q2A1-Q2A10)

+-		+
	Key	
-		I
	frequency of responses	
	column percent of cases	
+-		+

	Central		Region Name Northern	Piedmont	Western	Total
Low-income families		4 50.00	7 58.33	4 100.00	4 66.67	25 67.57
Single parents		4 50.00	5 41.67	3 75.00	3 50.00	18 48.65
Fathers		5 62.50	-	3 75.00	1 16.67	16 43.24
Parenting teens			5 41.67		2 33.33	13 35.14
Parents with disabilities		2 25.00	3 25.00		2 33.33	
Parents with children with disabilities			3 25.00		1 16.67	11 29.73
Other targeted groups	_	2 25.00	-	1 25.00	2 33.33	11 29.73
Non-English speaking parents		1 12.50		2 50.00	0.00	7 18.92
Incarcerated parents		1 12.50	3 25.00	1 25.00	0.00	6 16.22
Pregnant teens		-	2 16.67	1 25.00	1 16.67	6 16.22
Total Cases	24 7	23 8	40 12	22	16 6	125 37

TABLE 42: GROUPS TARGETED FOR EARLY PREVENTION SERVICES BY AGENCY CLASS SIZE (Q2A1-Q2A10)

+-		+
	Key	
-		I
	frequency of responses	
	column percent of cases	
+-		+

		ass - 2009	
	2	3	Total
Low-income families	'	21 67.74	
Single parents		17 54.84	48.65
Fathers	'		16
Parenting teens		12 38.71	
Parents with disabilities	'	11 35.48	32.43
Parents with children with disabilities			11
Other targeted groups		10 32.26	•
Non-English speaking parents		7 22.58	•
Incarcerated parents	1 16.67		
Pregnant teens		6 19.35	
Total Cases	11 6	114 31	•

^{**}No Class 1 agencies responded to this survey item

TABLE 43: SELECTIVE EARLY PREVENTION SERVICES AGENCY DIRECTLY PROVIDES TO HIGH RISK GROUPS (Q2B1-Q2B9)

Group	Number	Percent of Respondents (n=37)
Info on available services	28	75.68
Distribution of parent education/child		
development materials	26	70.27
Parent education for high risk groups	22	59.46
Financial assistance	20	54.05
Public speaking for high risk groups	18	48.65
Parent training for high risk groups	15	40.54
Parent support groups	12	32.43
Other prevention services targeted	10	27.03
Translator services	7	18.92

TABLE 44: OTHER PREVENTION SERVICES TARGETED TO HIGH RISK GROUPS (Q2B_TEXT)

Afterschool program for a targeted neighborhood

General intake and emergency assistance

Resource Mother Program

Drop in neighborhood centers in high risk neighborhoods

Linkages to employment readiness, housing assistance programs

Support group

Facilitate Men's Groups

One on one parenting and counseling

Our CPS Supervisor provides information on preventing child abuse/neglect to VIEW clients as part of their training

Parent Training for high risk groups

TABLE 45: SELECTIVE EARLY PREVENTION SERVICES AGENCY DIRECTLY PROVIDES TO HIGH RISK GROUPS BY REGION (Q2B1-Q2B9)

			R	egion		
	Central	Eastern	Northern	Piedmont	Western	Total
Group	(n=7)	(n=8)	(n=12)	(n=4)	(n=6)	(n=37)
Info on available services	3	7	10	3	5	28
	42.86%	87.50%	83.33%	75.00%	83.33%	75.68%
Distribution of parent education/child			10	3	4	26
development materials	3	6				
	42.86%	75.00%	83.33%	75.00%	66.67%	70.27%
Parent education for high risk groups	2	7	6	4	3	22
	28.57%	87.50%	50.00%	100.00%	50.00%	59.46%
Financial assistance	4	5	6	2	3	20
	57.14%	62.50%	50.00%	50.00%	50.00%	54.05%
Public speaking for high risk groups	4	4	6	3	1	18
	57.14%	50.00%	50.00%	75.00%	16.67%	48.65%
Parent training for high risk groups	1	5	5	2	2	15
	14.29%	62.50%	41.67%	50.00%	33.33%	40.54%
Parent support groups	1	3	6	1	1	12
	14.29%	37.50%	50.00%	25.00%	16.67%	32.43%
Other prevention services targeted	2	2	2	2	2	10
-	28.57%	25.00%	16.67%	50.00%	33.33%	27.03%
Translator services	0	0	4	2	1	7
	0.00%	0.00%	33.33%	50.00%	16.67%	18.92%

TABLE 46: SELECTIVE EARLY PREVENTION SERVICES AGENCY DIRECTLY PROVIDES TO HIGH RISK GROUPS BY AGENCY CLASS SIZE (Q2B1-Q2B9)

+	H
Key	
frequency of responses	
column percent of cases	
+	H

	Agency Cla 2	ass - 2009 3	Total
Info on available services		24 77.42	
Distribution of parent ed/child dev materials		22 70.97	70.27
Parent education for high risk groups		20 64.52	22
Financial assistance	66.67	16 51.61	54.05
Public speaking for high risk groups		17	
Parent training for high risk groups		14 45.16	40.54
Parent support groups	1 16.67	11 35.48	'
Other prevention services targeted		7 22.58	'
Translator services	1 16.67	-	
Total Cases	'	137 31	

^{**}No Class 1 agencies responded to this survey item

TABLE 47: STAFF WHO PROVIDE SELECTIVE EARLY PREVENTION SERVICES TO HIGH RISK GROUPS (Q2c1-Q2c8)

		Percent of Respondents
Staff	Number	(n=37)
Family stabilization or other staff	21	56.76
CPS on-going services worker	20	54.05
CPS investigative worker	19	51.35
Other worker	18	48.65
CPS family assessment worker	17	45.95
Foster care worker	16	43.24
Adoption worker	11	29.73
Generic worker	11	29.73

TABLE 48: OTHER STAFF WHO PROVIDE SELECTIVE EARLY PREVENTION SERVICES TO HIGH RISK GROUPS (Q2C_TEXT) Family Support Worker service intake worker, training specialist Social Work Aide, Intern Child Care Staff 3 Rivers Health District Selected staff from multiple programs do it as volunteers Prevention SW; VIEW case managers; PACT Coordinator; contracted staff to facilitate groups intake Director

Prevent CPS Supervisor

Youth Development Specialists (Parent Education Coordinator); Healthy Families Fatherhood Services Coordinator

Homeless Action Response Team Social Workers

Service Supervisor

Contracted Vendor Homeless Services Worker

Foster Care Trainer

contract staff ,volunteers

Table 49: List of agencies who provide family stabilization staff or other staff (q2c1)
Campbel1
Charlottesville
Chesapeake
Clarke
Culpeper
Danville
Fairfax County/City/Falls Church
Fluvanna
Fredericksburg
Hampton
Isle of Wight
Loudoun
Louisa
Mathews
Norfolk
Portsmouth
Prince William
Pulaski
Richmond City
Stafford
Sussex

TABLE 50: STAFF WHO PROVIDE SELECTIVE EARLY PREVENTION SERVICES TO HIGH RISK GROUPS BY REGION (Q2c1-Q2c8)

+-		+
	Key	
-		
	frequency of responses	
	column percent of cases	I
+-		+

	 Central	Eastern	Region Name Northern	Piedmont	Western	Total
Family stabilization or other staff		7 87.50	8 66.67	3 75.00	1 16.67	21 56.76
CPS on-going services worker	5	3	7	1	4	20
	71.43	37.50	58.33	25.00	66.67	54.05
CPS investigative worker	5	3	5	2	4	19
	71.43	37.50	41.67	50.00	66.67	51.35
Other worker	4	4	4	2	4	18
	57.14	50.00	33.33	50.00	66.67	48.65
CPS family assessment worker	5	3	5	1	3	17
	71.43	37.50	41.67	25.00	50.00	45.95
Foster care worker	5 71.43	2 25.00	6 50.00	1 25.00	2 33.33	16 43.24
Adoption worker	3 42.86	2 25.00	5 41.67	0.00	1 16.67	11 29.73
Generic worker	4 57.14	2 25.00	4 33.33	0.00	1 16.67	11 29.73
Total	33	26	44	10	20	133
Cases	7	8	12	4	6	37

Valid cases: 37 Missing cases: 77

TABLE 51: STAFF WHO PROVIDE SELECTIVE EARLY PREVENTION SERVICES TO HIGH RISK GROUPS BY AGENCY CLASS SIZE (Q2C1-Q2C8)

+	+
Key	
frequency of responses	
column percent of cases	
+	+

	Agency Class	- 2009 3	Total
Family stabilization or other staff		19 61.29	
CPS on-going services worker	4 66.67	16 51.61	
CPS investigative worker	3 50.00	16 51.61	
Other worker	33.33	16 51.61	48.65
CPS family assessment worker	3	14 45.16	
Foster care worker	2 33.33	14 45.16	
Adoption worker	1 16.67	10 32.26	
Generic worker	5 83.33	6 19.35	11 29.73
Total Cases	22 6	111	133 37

^{**}No Class 1 agencies responded to this survey item

TABLE 52: FUNDING SOURCES USED TO PURCHASE SELECTIVE EARLY PREVENTION SERVICES FOR HIGH RISK GROUPS (Q2D1-Q2D12)

		Percent of Respondents
Funding Source	Number	(n=37)
Safe and Stable Families	21	56.76
Budget line item 829 Family Preservation	21	56.76
CSA funds	15	40.54
Community resources	13	35.14
100% local funds	11	29.73
Medicaid	10	27.03
Other funding sources	9	24.32
Grant funding	7	18.92
Adoption assistance	6	16.22
Foundations and corporations	6	16.22
United Way	4	10.81
Community block grants	3	8.11

TABLE 53: LIST OF AGENCIES USING GRANT FUNDING SOURCES FOR SELECTIVE EARLY PREVENTION SERVICES (Q2D1)
Charlottesville
Culpeper
Mathews
Newport News
Richmond City
Sussex
Warren

TABLE 54: LIST OF AGENCIES USING OTHER FUNDING SOURCES FOR SELECTIVE EARLY PREVENTION SERVICES (Q2D12)
Campbel1
Chesterfield/Colonial Heights
Fairfax County/City/Falls Church
Hampton
King George
Lee
Montgomery
Pulaski
Richmond City

Table 55: List of other funding sources for selective early prevention services (Q2D_TEXT)
Funding through non profits, budget line 824/OPS funds
VDSS budget lines
Mostly local funds but revenue sources for staff are blended.
TANF funds
Donations
ΔI
N/A no supplies are utilized
CPS funds
CPS Preventive Funds (budget line item 824)

Table 56: List of grant funding title(s) and source(s) for early prevention services to high risk groups (Q2D_grant)

Safe Schools Healthy Students

Email: beth.jones@dss.virginia.gov

HFV Funds and PSSF Funds

Owens and Mathews Community Foundation (this is a private and not public funding source)

VDSS-Division of Family Services-CPS (Virginia Family Violence Prevention Program); VDOH-Engaging Men and Boys-Violence Prevention; Virginia Tobacco Settlement Fund (Virginia Foundation for Healthy Youth)

Emergency Shelter Grant (HUD); Housing Code Enforcement & Counseling Program (HUD); Shelter Plus Care - CoC (HUD)

Cameron foundation

Foster Care Training

TABLE 57: FUNDING SOURCES USED TO PURCHASE SELECTIVE EARLY PREVENTION SERVICES FOR HIGH RISK GROUPS BY REGION (Q2D1-Q2D12)

	Central		Region Name Northern	Piedmont	Western
Safe and Stable Families	5 71.43	6 75.00	7 58.33	1 25.00	2 33.33
Budget line item 829 Family Preservation	4 57.14	5 62.50	7 58.33	1 25.00	4 66.67
CSA funds		3 37.50	4 33.33	3 75.00	3 50.00
Community resources		3 37.50	5 41.67	1 25.00	2 33.33
100% local funds	2 28.57	2 25.00	3 25.00	3 75.00	1 16.67
Medicaid	2 28.57	1 12.50	4 33.33	2 50.00	1 16.67
Other funding sources		1 12.50	2 16.67	1 25.00	3 50.00
Grant funding	1 14.29	3 37.50	2 16.67	1 25.00	0.00
Adoption assistance	0.00	0.00	5 41.67	0.00	1 16.67
Foundations and corporations	1 14.29		1 8.33	0.00	2 33.33
United Way	0.00	0.00	2 16.67	1 25.00	1 16.67
Community block grants	1 14.29	1 12.50	1 8.33	0.00	0.00
Total Cases		27 8	43 12	14 4	20 6

TABLE 58: FUNDING SOURCES USED TO PURCHASE SELECTIVE EARLY PREVENTION SERVICES FOR HIGH RISK GROUPS BY AGENCY CLASS SIZE (Q2D1-Q2D12)

+	H
Key	
frequency of responses	
column percent of cases	
+	H

	Agency Cla	ass - 2009 3	Total
Safe and Stable Families	4 66.67	17 54.84	
Budget line item 829 Family Preservation	4 66.67	17 54.84	'
CSA funds	1 16.67	14 45.16	
Community resources	2 33.33	11 35.48	•
100% local funds	2 33.33	9 29.03	'
Medicaid	1 16.67	29.03	
Other funding sources	1 16.67	8 25.81	•
Grant funding	1 16.67	6 19.35	•
Adoption assistance	1 16.67	5 16.13	
Foundations and corporations	1 16.67	5 16.13	
United Way	0.00	4 12.90	
Community block grants	1 16.67	2 6.45	•
Total Cases		107 31	•

TABLE 59: USE OF VOLUNTEERS TO PROVIDE SELECTIVE EARLY PREVENTION SERVICES FOR HIGH RISK GROUPS (Q2E)

Did you use volunteers to provide services?	Freq.	Percent	Cum.
Yes No	12 25	32.43 67.57	32.43
Total	37	100.00	

Table 60: List of agencies that use volunteers for selective early prevention services for high risk groups (Q2E) Campbell Carroll Charlottesville Chesapeake Fairfax County/City/Falls Church Hampton Henrico Louisa Norfolk Page Sussex

TABLE 61: HOW VOLUNTEERS ARE USED FOR SELECTIVE EARLY PREVENTION SERVICES FOR HIGH RISK GROUPS (W2F TEXT)

Assistance with community events and transportation

Provide them with educational and information to dispense within the community especially specific target areas that they work with or are related within somehow

Child Care

Washington

To seek community resources, participate in support groups, complete applications, assessments, and complete funding request

Facilitate parent training classes.

Case management, service linking, monitoring, and follow up

parenting education

To provide respite to families

Answering the Homeless Hotline

Healthy Families of Page County provides services to first time parents (substance exposed, high risk, CPS history), Page Pregnancy Center volunteers for high risk single mothers.

Transportation

Direct and supportive services

EARLY PREVENTION STRATEGIES PROVIDED BY LDSS TO HIGH RISK SPECIFIC FAMILIES

TABLE 62: PROVISION OF EARLY PREVENTION STRATEGIES DIRECTLY TO HIGH RISK FAMILIES (Q3)

Do you provide selective/s econdary services?	Freq.	Percent	Cum.
Yes No	107 7	93.86 6.14	93.86 100.00
Total	114	100.00	

TABLE 63: PROVISION OF EARLY PREVENTION STRATEGIES DIRECTLY TO HIGH RISK FAMILIES BY REGION (Q3)

Region	Do you pr selective/s servio	secondary	
Name	Yes	No	Total
Central	24 96.00	1 4.00	25
Eastern	22 100.00	0.00	22
Northern	21 87.50	3 12.50	24
Piedmont	22 95.65	1 4.35	23
Western	18 90.00	10.00	20
Total	107 93.86	7 6.14	114

TABLE 64: PROVISION OF EARLY PREVENTION STRATEGIES DIRECTLY TO HIGH RISK FAMILIES BY AGENCY CLASS SIZE (Q3)

Agency Class - 2009	Do you p selective/ servi Yes	secondary	Total
1	3 100.00	0.00	3 100.00
2	28 93.33	2 6.67	30
3	76 93.83	5 6.17	81
Total	107 93.86	7 6.14	114 100.00

TABLE 65: SOURCES OF REFERRALS FOR HIGH RISK SPECIFIC FAMILIES (Q3A1-Q3A21)

		Percent of
		Respondents
Source	Number	(n=107)
Courts	102	95.33
Schools	99	92.52
Law enforcement	88	82.24
CPS staff	86	80.37
Self-referral by family	86	80.37
Eligibility staff	83	77.57
Community Service Boards	80	74.77
Hospitals	77	71.96
Public mental health	77	71.96
Guardian Ad Litem	75	70.09
Medical professionals	73	68.22
Head Start	71	66.36
Other staff	71	66.36
Private mental health	60	56.07
Domestic violence shelters	53	49.53
Other community based nonprofits	47	43.93
Churches	45	42.06
Homeless shelters	41	38.32
CASA volunteers	31	28.97
Child advocacy centers	30	28.04
Other referral sources	6	5.61

TABLE 66: OTHER SOURCES OF REFERRALS FOR HIGH RISK SPECIFIC FAMILIES (Q3A_TEXT)
referrals from general public, Health Dept.
211
None selected
Military Bases
FAPT and Court Services
child care centers

TABLE 67: SELECTIVE EARLY PREVENTION SERVICES PROVIDED DIRECTLY TO SPECIFIC FAMILIES AT RISK (Q3B1-Q3B17)

		Percent of
		Respondents
Service	Number	(n=107)
Information and referral	105	98.13
Case management/coordination	89	83.18
Advocacy on behalf of the family	83	77.57
Finding relatives to enhance parent support	79	73.83
Other financial assistance	67	62.62
Transportation	66	61.68
LDSS funded child care	61	57.01
Services to targeted children	57	53.27
Domestic violence prevention	31	28.97
Counseling by LDSS	30	28.04
Translator services	30	28.04
Children's services within domestic violence programs	29	27.10
LDSS funded respite care	28	26.17
Mentoring	25	23.36
LDSS funded home repair	24	22.43
Developmental screening	20	18.69
Other prevention services targeted	10	9.35

TABLE 68: OTHER SELECTIVE EARLY PREVENTION SERVICES PROVIDED DIRECTLY TO SPECIFIC FAMILIES AT RISK (Q3B_TEXT)
4H camp, special baskets at holidays, and toys at Christmas
Academic support
church funded home repair
intake & emergency services, budget line 824/OPS \$\$
foster care prevention
Family Engagement Meetings
Family Partnership Meetings
Funding for local SA Treatment thru PSSF Grant award
one on one parenting and counseling
home visitation

Table 69: Selective Early Prevention Services provided directly to specific families at risk by region (Q3b1-Q3b17)

	Region					
Service	Central (n=24)	Eastern (n=22)	Northern (n=21)	Piedmont (n=21)	Western (n=18)	Total (n=107)
Information and referral	24	22	21	21	17	105
	100.00%	100.00%	100.00%	95.45%	94.44%	98.13%
Case management/coordination	19	19	19	18	14	89
	79.17%	86.36%	90.48%	81.82%	77.78%	83.18%
Advocacy on behalf of the family	19	18	16	17	13	83
-	79.17%	81.82%	76.19%	77.27%	72.22%	77.57%
Finding relatives to enhance parent support	15	18	17	18	11	79
	62.50%	81.82%	80.95%	81.82%	61.11%	73.83%
Other financial assistance	12	15	15	16	9	67
	50.00%	68.18%	71.43%	72.73%	50.00%	62.62%
Transportation	8	19	14	16	9	66
-	33.33%	86.36%	66.67%	72.73%	50.00%	61.68%
LDSS funded child care	8	15	15	13	10	61
	33.33%	68.18%	71.43%	56.09%	55.56%	57.01%
Services to targeted children	8	16	14	13	6	57
,	33.33%	72.73%	66.67%	56.09%	33.33%	53.27%
Domestic violence prevention	3	12	8	5	3	31
-	12.50%	54.55%	38.10%	22.73%	16.67%	28.97%
Counseling by LDSS	5	9	8	5	3	30
<i>y</i> 1	20.83%	40.91%	38.10%	22.73%	16.67%	28.04%
Translator services	6	8	11	3	2	30
	25.00%	36.36%	52.38%	13.64%	11.11%	28.04%
Children's services within domestic violence						
programs	5	9	8	4	3	29
	20.83%	40.91%	38.10%	18.18%	16.67%	27.10%
LDSS funded respite care	2	9	9	5	3	28
-	8.33%	40.91%	42.86%	22.73%	16.67%	26.17%
Mentoring	4	7	5	5	4	25
3	16.67%	31.82%	23.81%	22.73%	22.22%	23.36%
LDSS funded home repair	4	5	8	4	3	24
1	16.67%	22.73%	38.10%	18.18%	16.67%	22.43%
Developmental screening	4	5	5	3	3	20
1	16.67%	22.73%	23.81%	13.64%	16.67%	18.69%
Other prevention services targeted	4	4	0	2	0	10
-	16.67%	18.18%	0.00%	9.09%	0.00%	9.35%

Table 70: Selective Early Prevention Services provided directly to specific families at risk by agency class size (q3b1-q3b17)

+-		+
	Key	
-		I
	frequency of responses	
	column percent of cases	
+-		+

	Agency	Class - 20	
	1	2	3
Information and referral	3 100.00	28	74 97.37
Case management/coordination	100.00	22 78.57	64 84.21
Advocacy on behalf of the family	2	18 64.29	63 82.89
Finding relatives to enhance parent support	2 66.67	15 53.57	62 81.58
Other financial assistance	2 66.67	15 53.57	50 65.79
Transportation	1 33.33	16 57.14	49 64.47
LDSS funded child care	0 0.00	11 39.29	50 65.79
Services to targeted children	2 66.67	10 35.71	45 59.21
Domestic violence prevention	0 0.00	6 21.43	25 32.89
Counseling by LDSS	1 33.33	5 17.86	24 31.58
Translator services	0 0.00	4 14.29	26 34.21
Children's services within domestic violence progs	0 0.00	6 21.43	23 30.26
LDSS funded respite care	1 33.33	3 10.71	24 31.58
Mentoring	0 0.00	3 10.71	22 28.95
LDSS funded home repair	0.00	5 17.86	19 25.00
Developmental screening	•	3 10.71	17 22.37
Other prevention services targeted	0 0.00	2 7.14	8 10.53
Total Cases	•	172 28	645 76

TABLE 71: RATING OF EARLY PREVENTION SERVICES PROVIDED DIRECTLY TO SPECIFIC FAMILIES AT RISK (Q3C1-Q3C17)

	Rated It	tem as 1 or 2
		Percent of
Service	Number	Respondents
Information and referral	83	85.57
Case management/coordination	74	87.06
Advocacy on behalf of the family	28	41.79
Finding relatives to enhance parent support	22	37.29
Other financial assistance	19	37.25
Transportation	16	33.33
LDSS funded child care	15	45.45
Services to targeted children	30	62.50
Domestic violence prevention	8	44.44
Counseling by LDSS	10	50.00
Translator services	3	23.08
Children's services within domestic violence programs	8	61.54
LDSS funded respite care	3	15.79
Mentoring	5	33.33
LDSS funded home repair	3	23.08
Developmental screening	5	41.67
Other prevention services targeted	1	25.00

Table 72: All staff who provide selective early prevention services to specific families at risk (Q3D1-Q3D10)

Staff	Number	Percent of Respondents (n=106)
CPS on-going services worker	73	68.87
CPS investigative worker	65	61.32
Intake worker	61	57.55
CPS family assessment worker	55	51.89
Foster care worker	54	50.94
Family stabilization staff	48	45.28
Generic worker	41	38.68
Adoption worker	33	31.13
Benefit program worker	27	25.47
Other worker	22	20.75

TABLE 73: OTHER STAFF WHO PROVIDE SELECTIVE EARLY PREVENTION SERVICES TO SPECIFIC FAMILIES AT RISK (Q3D_TEXT)
School based Prevention workers-Family Support/Bright Stars
MH staff
Child Care
All Service staff including Soc. Worker, Case Aid, ESW
training specialist, child care worker
Social Work Aide, Intern
CPS, Foster Care Adult Services and Adoption Supervisors
Child Care Social Worker
SW Supervisory staff
CSA Coordinator
Director
Program Manager
Kids Help worker
Healthy Families Staff
Prisoner Re-entry program Social Worker
Human Service Aides
supervisor
Truancy prevention workers
Child care worker; FC/A and CPS Supervisors
SW Supervisor
Homemaker/parent aide
child care worker

TABLE 74: LIST OF AGENCIES WITH FAMILY STABILIZATION STAFF (Q3D2)
Albemarle
Buckingham
Caroline
Chesapeake
Clarke
Culpeper
Danville
Fairfax County/City/Falls Church
Fauquier
Fluvanna
Franklin County
Frederick
Fredericksburg
Greene
Halifax
Hampton
Henry/Martinsville
Isle of Wight
James City
Loudoun
Louisa
Lynchburg
Mathews
Mecklenburg
Newport News
Norfolk
Northampton
Petersburg
Portsmouth
Powhatan
Prince William
Pulaski
Richmond City
Roanoke City
Roanoke County/Salem
Scott
Smyth
Southampton
Spotsylvania
Stafford
Surry
Sussex
Virginia Beach
Westmoreland
Williamsburg
Winchester
Wythe
York/Poquoson

Office of Research & Planning

TABLE 75: LIST OF AGENCIES WITH OTHER WORKER STAFF (Q3D10)
Albemarle
Arlington
Bristol
Brunswick
Campbell
Carroll
Chesapeake
Chesterfield/Colonial Heights
Gloucester
Hampton
King George
Manassas
Mathews
Newport News
Norfolk
Northampton
Richmond County
Rockingham/Harrisonburg
Scott
Surry
Washington
Wythe

TABLE 76: ALL STAFF WHO PROVIDE SELECTIVE EARLY PREVENTION SERVICES TO SPECIFIC FAMILIES AT RISK BY REGION (Q3D1-Q3D10)

+	-+
Key	
	-
frequency of responses	
column percent of cases	
+	-+

	Central		Region Name Northern	Piedmont	Western	Total
CPS on-going services worker		14 63.64		16 76.19	13 72.22	73 68.87
CPS investigative worker	12 50.00	14 63.64			12 66.67	65 61.32
Intake worker	8 33.33	14 63.64		14 66.67	12 66.67	61 57.55
CPS family assessment worker	11 45.83	12 54.55		11 52.38	10 55.56	55 51.89
Foster care worker	10 41.67	12 54.55	10 47.62		12 66.67	54 50.94
Family stabilization staff	7 29.17		13 61.90	9 42.86	4 22.22	48 45.28
Generic worker 		10 45.45		7 33.33	5 27.78	41 38.68
Adoption worker	7 29.17			-	4 22.22	33 31.13
Benefit program worker	4 16.67	5 22.73	7 33.33	5 23.81	6 33.33	27 25.47
Other worker	2 8.33	9 40.91	-	2 9.52	5 27.78	22 20.75
Total Cases	91 24	114 22	98 21	93 21	83 18	479 106

TABLE 77: ALL STAFF WHO PROVIDE SELECTIVE EARLY PREVENTION SERVICES TO SPECIFIC FAMILIES AT RISK BY AGENCY CLASS SIZE (Q3D1-Q3D10)

+	+
Key	
	-
frequency of responses	
column percent of cases	
+	+

	Ager	ncy Class - 2	2009	Total
CPS on-going services worker			60 80.00	
CPS investigative worker			52 69.33	•
Intake worker			55 73.33	
CPS family assessment worker			47 62.67	
Foster care worker	•		42 56.00	
Family stabilization staff			43 57.33	45.28
Generic worker				41
Adoption worker			26 34.67	
Benefit program worker	0.00	3 10.71	24 32.00	•
Other worker	0.00		19 25.33	•
Total Cases		89 28	387 75	

TABLE 78: FUNDING SOURCES USED TO PROVIDE SELECTIVE EARLY PREVENTION SERVICES TO SPECIFIC FAMILIES AT RISK (Q3E1-Q3E12)

		Percent of Respondents
Funding Source	Number	(n=106)
CSA funds	85	80.19
Budget line item 829 Family Preservation	82	77.36
Safe and Stable Families	78	73.58
Medicaid	75	70.75
Community resources	65	61.32
100% local only funds	30	28.30
Adoption assistance	26	24.53
Other funding sources	17	16.04
Grant funding	16	15.09
United Way	10	9.43
Foundations and corporations	10	9.43
Community block grants	7	6.60

TABLE 79: LIST OF AGENCIES THAT INDICATED GRANT FUNDING TO PROVIDE SELECTIVE EARLY PREVENTION SERVICES (Q3E1)
Albemarle
Bristol
Brunswick
Culpeper
Dinwiddie
Fairfax County/City/Falls Church
Frederick
Lancaster
Mathews
Newport News
Richmond City
Richmond County
Smyth
Surry
Washington
Westmoreland

Table 80: List of agencies that indicated community resources for funding of selective early prevention				
SERVICES (Q3E10)				
Albemarle				
Alexandria				
Alleghany/Covington Appomattox				
Bath				
Botetourt				
Bristol				
Brunswick Buckingham				
Campbell				
Carroll				
Charlottesville				
Chesapeake Chesterfield/Colonial Heights				
Clarke				
Culpeper				
Cumberland				
Dinwiddie Fairfax County/City/Falls Church				
Fluvanna				
Franklin City				
Franklin County				
Frederick Giles				
Greensville/Emporia				
Halifax				
Hampton				
Henrico				
Henry/Martinsville Highland				
Isle of Wight				
King William				
Lancaster				
Lee Loudoun				
Louisa				
Lunenburg				
Lynchburg				
Manassas Mathews				
Middlesex				
Montgomery				
Nelson				
Norfolk Northampton				
Northumberland				
Norton				
Page				
Petersburg Portsmouth				
Prince William				
Radford				
Richmond County				
Roanoke City Rockbridge/Buena Vista/Lexington				
Russell				
Smyth				
Southampton				
Stafford Sussex				
Virginia Beach				
Westmoreland				
Williamsburg				
Winchester				
Wythe				

Table 81: List of agencies that indicated other funding sources for selective early prevention services (Q3e12)
Accomack
Albemarle
Bland
Campbel1
Fairfax County/City/Falls Church
Fauquier
Floyd
Gloucester
Henrico
King George
Newport News
Norfolk
Prince William
Pulaski
Richmond City
Scott
Stafford

TABLE 82: LIST OF GRANT FUNDING TITLE(S) AND SOURCE(S) FOR SELECTIVE EARLY PREVENTION SERVICES (Q3E_GRANT) Charlottesville Area Community Foundation-for summer camp activities Quality Initiative from Child Care Program to educate our Child Care Provides and Centers Employment Advancement TANF grant HFV Funds and PSSF Funds United Way, Basic Needs Grant and Cameron Foundation (FPM) CSBG VOCA PSSF Owens, PSSF Office of Juvenile Justice and Delinquency Prevention FY 2009 Earmarks Program; VDSS-CPS Healthy Families Funding Emergency Shelter Grant (HUD) Safety Net Safe and Stable Families Program funding Robert Wood Johnson Foundation, Childhood Obesity Prevention- Western Tidewater FACT Grant, United Way Grant

TABLE 83: LIST OF OTHER FUNDING SOURCES USED TO PROVIDE SELECTIVE EARLY PREVENTION SERVICES TO SPECIFIC FAMILIES AT RISK (Q3E_TEXT) donations solicited at holidays private donations part of generic staff position budget line 824/OPS funds, funding through non profits Some local funds. fund raising by community businesses We don't have funds for these services Administrative funding for portions, infrequently VIEW federal stimulus money Donations City funds TANF/VIEW SNAP & TANF Budget Line 854 Budget line item 824-CPS Preventive Funds Child care funding; did use BL 824 foster care prevention

VOCA Dept of Social Services

TABLE 84: SELECTIVE EARLY PREVENTION SERVICES FUNDING SOURCES BY REGION (Q3E1-Q3E12)

+-		+
	Key	
-		
	frequency of responses	
	column percent of cases	
+-		+

!	Central		Region Name Northern	Piedmont	Western	Total
CSA funds	16 66.67	19 86.36	18 85.71	19 90.48	13 72.22	
Budget line item 829 Family Preservation	19 79.17	19 86.36	15 71.43	16 76.19	13 72.22	
Safe and Stable Families			17 80.95	14 66.67	,	
Medicaid	16 66.67	15 68.18	18 85.71	19 90.48	7 38.89	75 70.75
Community resources			12 57.14	15 71.43	10 55.56	
100% local only funds	9 37.50		6 28.57	7 33.33	3 16.67	
Adoption assistance		4 18.18	10 47.62	3 14.29	4 22.22	
Other funding sources		4 18.18	5 23.81	2 9.52	4 22.22	17 16.04
Grant funding			3 14.29	1 4.76	3 16.67	
United Way	0		4 19.05	2 9.52	1 5.56	
Foundations and corporations	1 4.17	3 13.64	2 9.52	2 9.52	2	
Community block grants	1 4.17		1 4.76		0.00	
Total Cases		115 22	111 21	102 21	72 18	

TABLE 85: SELECTIVE EARLY PREVENTION SERVICES FUNDING SOURCES FUNDING SOURCES BY AGENCY CLASS SIZE (Q3E1-Q3E12)

+	+
Key	
frequency of responses	
column percent of cases	
+	+

	Agen	cy Class - 2	2009	Total
CSA funds	2 2 66.67	20 71.43	63 84.00	•
Budget line item 829 Family Preservation	2 2 66.67	18 64.29	62 82.67	
Safe and Stable Families	2 66.67	16 57.14	60 80.00	
Medicaid	1 33.33	17 60.71	57 76.00	-
Community resources	2 66.67	15 53.57	48 64.00	
100% local only funds	1 33.33	9 32.14	20 26.67	
Adoption assistance	0.00	4 14.29	22 29.33	
Other funding sources	1 33.33	2 7.14	14 18.67	1
Grant funding	0.00	3 10.71	13 17.33	
United Way	0.00	1 3.57	9 12.00	
Foundations and corporations	0.00	3 10.71	7 9.33	
Community block grants	0.00	2 7.14	5 6.67	•
Total Cases	11	110 28	380 75	•

TABLE 86: USE OF VOLUNTEERS USED TO PROVIDE SELECTIVE EARLY PREVENTION SERVICES TO SPECIFIC FAMILIES AT RISK (Q3F)

Do you use volunteers in providing these	 - - 		
services?	Freq.	Percent	Cum.
Yes No	21 85	19.81 80.19	19.81 100.00
Total	106	100.00	

Table 87: List of agencies that use volunteers to provide selective early prevention services (Q3f)
Albemarle
Appomattox
Bristol
Carroll
Charlotte
Chesapeake
Dinwiddie
Fairfax County/City/Falls Church
Hampton
Highland
James City
Louisa
Middlesex
Montgomery
Newport News
Norfolk
Page
Roanoke City
Southampton
Sussex
Washington

TABLE 88: DESCRIPTION OF HOW VOLUNTEERS ARE USED TO PROVIDE SELECTIVE EARLY PREVENTION SERVICES (QG3_TEXT) Student Interns-case management

Transportation

Americorps staff to help with programs and organization of events, individual families education and support.

Provide them with education and information to dispense within the community

To assist with emergency needs

To seek community resources, complete applications and referrals, complete funding request, complete needs assessments

Lifting, moving, distribution of items

Parent training, mentors.

Case management

Transportation, mentoring, community support

BSW and MSW Student Interns are used to provide information and referral, some case management and transportation.

Food, heat, lights, and Christmas gifts

Local community agency, Hands Across Middlesex, has volunteers that assist families in need.

to help with transportation of clients, to provide information and referral sources

to serve on community advisory boards and to assist with assessments and referrals

Answering phones, filing, records management

Page Pregnancy Center for single high risk mothers, Healthy Families of Page County for first time mothers

We use interns to help with case management.

Distribution Transportation

Direct and supportive services

USE OF FAMILY PARTNERSHIP MEETINGS

Table 89: Service categories that have used a family partnership meeting within the last year (Q4 $_1$ -Q4 $_1$ 0)

		Percent of Respondents
Service Category	Number	(n=112)
Families who had a valid referral	86	76.79
Families at risk prior to valid referral	56	50.00
Foster families at risk of placement disruption	52	46.43
Youth in IL arrangements	29	25.89
Adopted child/family at risk of disruption	28	25.00
Other use of FPM	22	19.64
Child aging out of foster care	19	16.96
Foster families at risk of abuse/neglect	12	10.71
None of the above	10	8.93
Adopted child/family at risk of abuse/neglect	9	8.04

Change of placement in FC

TABLE 90: LIST OF OTHER SERVICE CATEGORIES USING A FPM (Q4_TEXT)
Child at risk of removal, foster child aging out without plans for after foster care
Foster Care Goal Change
Families for whom the court has put DSS on notice of possible foster care placement (made DSS a party to the
case) and those in which relief of custody has been filed with the court
Change of Goal
DSS on notice for custody, petition for relief of custody
Change of Placement or Maintaining Placement
Change of placement of foster child
Placement changes and goal changes
Youth who display extremely challenging emotional/behavioral challenges
Foster Care, Change of Goal cases
Court request.
goal change
Agency has not had FPM. First one is being scheduled in June for foster care case where children are changing
placement to a parent.
This agency will use FPMs for any case as the need arises.
Still trying to arrange meetings
Foster child returning home from placement
Change of Goal, Permanency Planning, Permanency Planning Review Meetings
Change of permanency goal; Reunification/emancipation
permanency goal changes
Haven't had one

Change of goal FC reunification

Table 91: Service categories that have used a family partnership meeting within the last year by region (Q4 $_1$ -Q4 $_1$ 0)

+	-+
Key	
	-
frequency of responses	
column percent of cases	
+	-+

 	Central	R Eastern	egion Name Northern	Piedmont	Western
Families who had a valid referral	14	19	21	15	17
	56.00	86.36	91.30	68.18	85.00
Families at risk prior to valid referral	11 44.00	14 63.64	14 60.87	9	8
Foster families at risk of placement disruption	13	13	11	9	6
	52.00	59.09	47.83	40.91	30.00
Youth in IL arrangements	9 36.00	7 31.82	9 39.13	2 9.09	10.00
Adopted child/family at risk of disruption	8 32.00	9 40.91	6 26.09	5 22.73	0.00
Other use of FPM	2	5	5	5	5
	8.00	22.73	21.74	22.73	25.00
Child aging out of foster care	7	4	5	2	1
	28.00	18.18	21.74	9.09	5.00
Foster families at risk of abuse/neglect	2	3	3	3	1
	8.00	13.64	13.04	13.64	5.00
None of the above	4 16.00	2 9.09	1 4.35	3 13.64	0.00
Adopted child/family at risk of abuse/neglect	2 8.00	3 13.64	3 13.04	1 4.55	0.00
Total	72	79	78	54	40
Cases	25	22	23	22	20

Table 92: Service categories that have used a family partnership meeting within the last year by agency class size (q4_1-q4_10)

+-		+
	Key	l
-		I
	frequency of responses	
	column percent of cases	
+-		+

	Agen	ncy Class - 2 2	009	Total
Families who had a valid referral		18 60.00	65 82.28	
Families at risk prior to valid referral	0.00	9 30.00	47 59.49	
Foster families at risk of placement disruption	0.00		42 53.16	
Youth in IL arrangements	0.00	7 23.33	22 27.85	25.89
Adopted child/family at risk of disruption	0.00	3 10.00	25 31.65	28 25.00
Other use of FPM	0.00	4 13.33		22
Child aging out of foster care	0.00	4 13.33	15 18.99	
Foster families at risk of abuse/neglect	0.00	4 13.33	8 10.13	
None of the above	0.00	6 20.00	4 5.06	
Adopted child/family at risk of abuse/neglect	0.00	1 3.33	8 10.13	
Total Cases	+3 3	66 30	254 79	

Information about CPS, Foster Care, Adoption

TABLE 93: FUNDING SOURCES USED TO PURCHASE PREVENTION SERVICES FOR CPS, FOSTER CARE, AND ADOPTION (Q5_1-Q5_13)

		Percent of
Funding Source	Number	Respondents (n=112)
CSA funds	110	98.21
Medicaid	103	91.96
Budget line item 829 Family Preservation	100	89.29
Safe and Stable Families	95	84.82
Community resources	72	64.29
Independent Living Program	67	59.82
Adoption assistance	66	58.93
100% local only funds	36	32.14
Grant funding	14	12.50
Other funding sources	14	12.50
United Way	13	11.61
Foundations and corporations	13	11.61
Community block grants	11	9.82

Table 94: Grant funding title(s) and source(s) for CPS, Foster Care, Adoption prevention (Q5_grant)
Employment Advancement TANF Grant
Basic Needs Cameron Foundation
Clothing Vouchers and other Household Items - Community Cares of Floyd County
VOCA grant
Respite Grant through VDSS
Cameron Foundation - family engagement
Title IV-E training grant used to educate and support relative caregivers and resource parents.
PSSF - DSS
Title IVE Resource Family Training Grant
Owens and Mathews Community Foundation (local foundation grant source)
Emergency Shelter Grant (HUD)
quality initiative
FACT Grant, United Way Grant
VOCA Dept of Social Services

Table 95: List of agencies using grant funding for CPS, Foster Care, and Adoption prevention ($Q5_1$)
Brunswick
Dinwiddie
Floyd
Frederick
Gloucester
Hopewell
James City
Lancaster
Lynchburg
Mathews
Richmond City
Sussex
Washington
Westmoreland

Table 96: Other funding sources used to purchase prevention services for CPS, Foster Care, and Adoption (Q5_TEXT)

nonprofit agencies, budget line 824/OPS funds

Some local funds.

fund raising from local businesses and donations

Community Action Agencies

VOCA grant

Budget line 824, Respite grant

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Donations

child placing agencies

And 824-Other purchased services prior to being eliminated

IV-E

824

CPS Preventive Funds (Budget line item 824); Adoption Subsidy for Special Service Fund

Child's SSI or SSA, special welfare Acct. donated funds

Used to use BL 824

Table 97: List of agencies using other funding sources (Q5_13)
Campbell
Fairfax County/City/Falls Church
Fauquier
Floyd
Frederick
Henrico
King George
King and Queen
Montgomery
New Kent
Northampton
Richmond City
Rockingham/Harrisonburg
Scott

SERVICES PROVIDED BY COMMUNITY-BASED RESOURCES

TABLE 98: NUMBER OF AGENCIES WITH NO COMMUNITY-BASED RESOURCES FOR ANY PREVENTION SERVICES (Q6_1)

None	Freq.	Percent	Cum.
No Yes	113	99.12 0.88	99.12 100.00
Total	114	100.00	

TABLE 98: AGENCIES THAT DID NOT HAVE COMMUNITY BASED RESOURCES (Q6_1)

Bath

TABLE 100: COMMUNITY-BASED RESOURCES USED TO PROVIDE PREVENTION SERVICES IN ANY PROGRAM AREA (Q6_2-Q6_25)

		Percent of Respondents
Resource	Number	(n=111)
Public mental health providers	107	96.40
Intensive in-home service providers	106	95.50
Head Start	93	83.78
Schools	93	83.78
Mentoring program providers	83	74.77
Private mental health providers	82	73.87
Public health providers	78	70.27
Domestic violence prevention providers	78	70.27
Churches	71	63.96
Part C Early Childhood Intervention	69	62.16
Private health providers	67	60.36
Healthy Families providers	65	58.56
Workshops and trainings by community groups	61	54.95
VA Cooperative Extension programs	59	53.15
Child Advocacy Centers	58	52.25
Respite care providers	53	47.75
Early Head Start	52	46.85
Other home visiting providers	45	40.54
Parent support group providers	43	38.74
Sexual Assault Centers	40	36.04
Other early childhood intervention programs	36	32.43
Stop Child Abuse Now	22	19.82
Other resources	9	8.11
Foundations and corporations	7	6.31

TABLE 101: OTHER COMMUNITY-BASED RESOURCES USED TO PROVIDE PREVENTION SERVICES IN ANY PROGRAM AREA
(Q6_TEXT)
Family resource Center
private non profits
Mental Health Support providers
transportation ,food banks, shelters, angel ministries
Agencies on Aging, Disability Rehab Services (DRS)
services thru TANF/VIEW; wraparound services
ACAA
Homeless Shelters and International Black Women's Caucus
Homeless Shelter, local Housing authority

TABLE 102: NUMBER OF AGENCIES THAT DID NOT USE PARENT SUPPORT GROUPS FOR PREVENTION SERVICES IN ANY PROGRAM AREA (Q6A1)

No parent support groups utilized	Freq.	Percent	Cum.
No Yes	76 38	66.67 33.33	66.67
Total	114	100.00	

TABLE 103: PARENT SUPPORT GROUP PROVIDERS USED IN THE COMMUNITY TO PROVIDE PREVENTION SERVICES IN ANY AREA (Q6A2-Q6A9)

		Percent of Respondents
Provider	Number	(n=74)
Mental health based support groups for any parent	38	51.35
Mental health based support groups for at risk par	38	51.35
Other parent support groups for at-risk families	33	44.59
Other parent support groups for general public	30	40.54
Other parent support groups	22	29.73
School based support groups for any parent	15	20.27
School based support groups for at risk parents	13	17.57
Circle of Parents	3	4.05

TABLE 104: LIST OF AGENCIES USING OTHER PARENT SUPPORT
groups (Q6A9)
Albemarle
Alexandria
Augusta/Staunton/Waynesboro
Brunswick
Campbell
Fauquier
Giles
Hampton
Hopewell
King and Queen
Mathews
Page
Petersburg
Prince William
Richmond City
Roanoke County/Salem
Rockingham/Harrisonburg
Scott
Shenandoah
Spotsylvania
Washington
York/Poquoson

TABLE 105: OTHER PARENT SUPPORT GROUP PROVIDERS USED IN THE COMMUNITY TO PROVIDE PREVENTION SERVICES IN ANY AREA (Q6a_text)

Foster Parent Support Group/Children Youth and Family Services Strengthening Families-Skills building

SCAN, CASA
Our Office on Youth provides parenting classes and support for early prevention to intervention parenting for

our office on fourn provides parenting classes and support for early prevention to intervention parenting for at-risk youth and families

DV, Kid's Haven Grief Support Group

Tough love, substance abuse, ARC. autism

New River Valley Community Services

Fatherhood support group supported by Hampton CSA; parent's of juvenile sex offender's support group; support group/training for adoptive parents

no answer in survey

safe and stable family grant therapist does parenting

Bay School of the Arts, Boys and Girls Club, Bay Aging grandparents support group

Support through CHOICES, our local domestic violence program/shelter

Petersburg Adoptive Parent Association

Virginia Cooperative Extension, DSS Anger Management, Nurturing Parent Group by DSS

Foster Care Parent Support Group

Adoptive Family Preservation Group

Timber Ridge Parent Support Group Foster Support Group

There are no parent support groups in our locality for prevention services

Connecting Teens and Parents

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other parenting classes

Mental Health based support group for any parent

Individualized Parenting Education in the family home.

Table 106: Population(s) targeted for workshops and trainings provided by community groups (Q6b2-Q6b8)

		Percent of
		Respondents
Population	Number	(n=111)
The general public	55	49.55
Foster families	50	45.05
High risk families	46	41.44
Families where domestic violence is present/suspected	39	35.14
Families where abuse/neglect has occurred	38	34.23
Adoptive families	38	34.23
No workshops or trainings provided by community	33	29.73
Families whose children have been removed	27	24.32

TABLE 107: LIST OF AGENCIES WITHOUT WORKSHOPS/TRAINING PROVIDED BY COMMUNITY GROUPS (Q6B1)
Accomack
Alleghany/Covington
Appomattox
Bedford County/City
Bland
Buckingham
Caroline
Dickenson
Dinwiddie
Essex
Fluvanna
Franklin City
Franklin County
Galax
Greene
Greensville/Emporia
Henry/Martinsville
Highland
King George
Lancaster
Lee
Lunenburg
Manassas
Manassas Park
Mecklenburg
Middlesex
Nelson
New Kent
Northumberland
Norton
Nottoway
Patrick
Prince George
Rappahannock
Rockbridge/Buena Vista/Lexington
Smyth
Southampton
Tazewell

FOSTER CARE DIVERSION SERVICES

Table 108: Number of agencies that facilitate alternative living arrangements with relatives or non-relatives (Q7)

Do you facilitate alternative living arrangement s?	 Freq.	Percent	Cum.
Yes No	106	94.64 5.36	94.64 100.00
Total	112	100.00	

Table 109: Number of agencies that facilitate alternative living arrangements with relatives or non-relatives - by region (Q7)

 Region	Do you fact alternative arrangeme	living	
Name	Yes	No	Total
Central	23 92.00	2 8.00	25
Eastern	20 90.91	2 9.09	22
Northern	22 95.65	1 4.35	23
Piedmont	21 95.45	1 4.55	22
Western	20 100.00	0.00	20
Total	106 94.64	6 5.36	112

Table 110: Number of agencies that facilitate alternative living arrangements with relatives or non-relatives - by agency class size (Q7)

Agency Class - 2009	Do you fa alternative arrange Yes	e living	Total
1	2 66.67	1 33.33	3 100.00
2	27 90.00	3 10.00	30
3	77 97.47	2 2.53	79 100.00
Total	106 94.64	6 5.36	112 100.00

Table 111: Estimation of the number of children diverted from foster care through alternative living arrangement in SFY2010 (Q7a)

Number of children diverted from foster care	 Freq.	Percent	Cum.
1-5 6-10 11-15 16-20 21-30 31-40 41-50 More than 50	37 22 15 14 6 1	34.26 20.37 13.89 12.96 5.56 0.93 0.93 11.11	34.26 54.63 68.52 81.48 87.04 87.96 88.89
Total	-+ 108	100.00	

Table 112: Estimation of the number of children diverted from foster care through alternative living arrangement in SFY2010 by region (Q7a)

Region Name	1-5			ldren diver 16-20		ster care 31-40	41-50	50+	Total
Central	12 50.00	4 16.67	4 16.67	1 4.17	0.00	0.00	0	3 12.50	24
Eastern	9 42.86	5 23.81	1 4.76	0.00	2 9.52	1 4.76	0	3 14.29	21
Northern	8 36.36	6 27.27	4 18.18	1 4.55	1 4.55	0	0	2 9.09	22
Piedmont	5 23.81	3 14.29	3 14.29	6 28.57	2 9.52	0.00	1 4.76	1 4.76	21
Western	3 15.00	4 20.00	3 15.00	6 30.00	1 5.00	0.00	0	3 15.00	20
Total	37 34.26	22 20.37	15 13.89	14 12.96	6 5.56	1 0.93	1 0.93	12 11.11	108

TABLE 113: ESTIMATION OF THE NUMBER OF CHILDREN DIVERTED FROM FOSTER CARE THROUGH ALTERNATIVE LIVING ARRANGEMENT IN SFY2010 BY CLASS SIZE (Q7A)

			foster care	rted from 1	ildren diver	umber of ch	Nı		Agency
Total	50+	41-50	31-40	21-30	16-20	11-15	6-10	1-5	Class
2	0.00	0.00	0.00	0.00	1 50.00	0.00	0.00	1 50.00	1
	0.00	0.00	0.00	0.00	2 7.14	2 7.14	7 25.00	17 60.71	2
78	12 15.38	1 1.28	1	6 7.69	11 14.10	13 16.67	15 19.23	19 24.36	3
108 100.00	12 11.11	1 0.93	1 0.93	6 5.56	14 12.96	15 13.89	22 20.37	37 34.26	Total

TABLE 114: NUMBER OF AGENCIES THAT PROVIDE DIRECT SERVICES TO DIVERSION FAMILIES (Q7B)

Do you provide services to diversion families?	Freq.	Percent	Cum.
No Yes	13 93	12.26 87.74	12.26 100.00
Total	106	100.00	

TABLE 115: LIST OF AGENCIES THAT PROVIDE DIRECT SERVICES TO DIVERSION FAMILIES (Q7B)
Accomack
Albemarle
Alexandria
Alleghany/Covington
Amherst
Appomattox
Arlington
Augusta/Staunton/Waynesboro
Bedford County/City
Bland
Botetourt
Bristol
Brunswick
Buckingham
Campbell
Caroline
Carroll
Charles City
Charlotte
Charlottesville
Chesterfield/Colonial Heights
Clarke
Cumberland
Danville
Dickenson
Dinwiddie
Essex
Fairfax County/City/Falls Church
Fauquier
Floyd
Fluvanna
Franklin City
Franklin County
Frederick
Galax
Giles

TABLE 115. LIST OF A SENSIES THAT PROVIDE RIBERT SERVICES TO DIVERSION FAMILIES (0.7s)
Table 115: List of agencies that provide direct services to diversion families (Q7B)
Gloucester
Greene
Greensville/Emporia
Halifax
Hampton
Henrico
Henry/Martinsville
Highland
Isle of Wight
James City
King William
Lancaster
Lee
Loudoun
Louisa
Lunenburg
-
Madison
Manassas
Mathews
Mecklenburg
Middlesex
Montgomery
Nelson
Newport News
Norfolk
Northampton
Northumberland
Nottoway
Page
Patrick
Petersburg
Portsmouth
Powhatan
Prince Edward
Prince William
Rappahannock
Richmond City
Richmond County
Roanoke City
Roanoke County/Salem
Rockbridge/Buena Vista/Lexington
Rockingham/Harrisonburg
Russell
Scott
Shenandoah
Smyth
Spotsylvania
Stafford
Surry
Tazewell
Virginia Beach
Washington
Westmoreland
Williamsburg
Winchester
Wythe
York/Poquoson

TABLE 116: COMMENTS ON PROVIDING DIRECT SERVICES TO DIVERSION FAMILIES (Q7B TEXT)

support services, link with other community resources

Services are limited and funding is an issue - families may need additional financial resources to take on the unexpected placement of a relative child

These cases can be very time intensive and so many times our case needs to close before we can resolve the situation. We work in conjunction with our CSA and PSSF staff to try to keep some type of CM in place but this is a gap for our area. We have submitted a proposal internally to try to address this and other prevention issues within our office because these cases tend to return if the larger issues are not addressed.

On a limited basis as we do not have sufficient staff to meet the need; we use parental agreements and family partnership meetings for diversion

we provide in-home services, mentoring, counseling

But support provided is inadequate; no formal infrastructure.

The agency provides information and makes referrals as necessary to these families including contact with court services. The agency also attempts to assist with childcare issues.

This depends on each situation and whether the agency is court ordered to follow families once alternative arrangements are made

In efforts to keep families united as a whole and or to assist parents with getting their children returned to them, we offer services to both categories of families that include, but is not limited to substance abuse services for parents, mental health treatment for parents, assistance with finding appropriate housing, intensive in home counseling and/or wraparound services, visitation services, and many more.

We provide some services to "diversion families" and/or birth families after an alternative living arrangement is made by the birth family. Also refer to other jurisdiction if outside the region for additional supports.

Rotary Club provides back to school clothes event for ad risk youth/families, Owens has provided items for infants/bedding for helping get children out of foster care.

If we are involved in a diversion, it is a result of a CPS and services are put into place

Referral to services through DSS or other community based organizations such as FAPT, case management, assist with applying for eligibility services.

This population is followed up by a prevention social worker for a period of no more than six (6) months for family stabilization.

Unattached child benefits are available to help defray the costs of rearing somebody else's' child.

Respite child care services, Parental Referrals to CSA, District 19, Medicaid referrals for Intensive In Home Services, Other caregiver's support and referrals made to residential placements such as the Joy Ranch, etc limited by staff availability

TABLE 117: Provision of direct services in diversion cases (Q7c1-Q7c4)

Service Recipient	Number	Percent of Respondents (n=93)
Relative or non-relative caregivers	92	98.92
Child	89	95.70
Original caregivers	82	88.17
Others	3	3.23

TABLE 118: OTHERS THAT ARE PROVIDED DIRECT SERVICES IN DIVERSION CASES (Q7C TEXT)

extended family

Relatives who serve as respite for the diversion families.

extended family members/support systems

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TABLE 119: SERVICES THAT ARE PROVIDED IN DIVERSION CASES (Q7D1-Q7D4)

Service	Number	Percent of Respondents (n=93)
Referral for services to providers outside agency	92	98.92
Referral for services within your agency	91	97.85
Case management	86	92.47
Other	8	8.60

Table 120: Other services that are provided in diversion cases (Q7D_text)
child care
referral to FAPT and PSSF
transfer of school as necessary
foster parent training if we have custody
Court ordered monitoring
therapeutic respite services
Kids Help Program
Referral/case management on FAPT

TABLE 121: AVERAGE LENGTH OF TIME SERVICES ARE PROVIDED IN DIVERSION CASES (Q7E)

Average length of Time	Freq.	Percent	Cum.
1-2 months 3-4 months 5-6 months More than 6 months	10 27 38 18	10.75 29.03 40.86 19.35	10.75 39.78 80.65 100.00
Total	93	100.00	

TABLE 122: CIRCUMSTANCES THAT AFFECT THE LENGTH OF TIME SERVICES ARE PROVIDED IN DIVERSION CASES (Q7F)

How well the new placement is going and service needs have been met

workload, ability to transfer to Family Support

securing safety and stability for the children

Court intervention

The family need for additional services.

Family has not improved or making slow progress

Financial or court issues

Our agency is working on closing CPS cases in a more timely manner but since we currently do not have the case management structure in place to handle the complex nature of these cases we end up keeping cases open longer than usual. When the relative placement is across jurisdictional lines this can further complicate matters.

If the goal is changed from return home to original caretakers and the diversion placement becomes the primary long term caretaker to the child.

cooperation of the individuals involved

Lack of time and resources to continue direct services after a short period of stabilization.

Change of custody, or court intervention.

The needs of the child and families (Birth and Diversion Families)

Whether the diversion family resides in our locality.

We do not have sufficient staff to meet totality of need

Unfortunately our local area has limited service providers therefore the amount of time our agency is involved has a lot to do with the waiting list with our local CSB and currently it is an average of 3 months just for an initial appointment and sometimes even for intake therefore making it a huge liability to stop involvement until this time.

Family's progress impacts time period.

progress and needs of family

Until risk is removed.

Needs of the child, care giver and parent

funds available

Investigations/Family Assessment Risk Factors, Safety of the child, implementation of services

The monitoring of the family and their compliance with services provided.

Impacted by the need of the family and desire to keep the child out of foster care and work toward reunification of the family.

families refuse services, move out of the area, improvement

Progress (or lack thereof) with the treatment plan

Resources/support family needs.

interference by bio parents, trauma of the child, issues with the caretaker and their family, poor family functioning

Needs of the children and family

The progress of the removal family, the availability of services and scheduling of appointments for both the removal family and the diversion family.

Court involvement

Incarceration of the parent, continued substance abuse, non compliance by caregiver

The progress the family makes with the services. The services could end earlier than 5 to 6 months or more time may be needed if adequate progress has not been made by the individuals involved.

Age of youth, level of need and whether it is reviewed by the court

Necessary internal agency policy/restrictions on the duration of services in these situations.

Safety and risk assessment to the child impacts the time period.

Financial stability of diversion family or relative placement, developmental, mental or emotional needs of the child and ability of the alternative placement to provide these needs.

No set time period for completion;

If it is foster care prevention, we are typically involved for a shorter period of time (through court orders) than we are in CPS ongoing cases which tend to mirror foster care cases where we attempt reunification with birth families.

Resources not available immediately and clients are being placed on waiting lists

Cooperation of all persons involved, further involvement in CPS

Progress of the overall family unit

Services remain open as long as families need them and if a CPO has been entered they remain open until the successful completion of court-ordered services.

Need of the family, availability of funds and/or services, cooperation of the parties

The court, how well the adjustment is going in the new living arrangement, how cooperative the parents are in making needed changes

Progress; risk removed

Resilience of family and community based supports

Time it takes to put services in place.

Denial of funding for services, stability of family, and child/family needs.

Court requiring continued Social Services involvement

Time to implementation of services.

TABLE 122: CIRCUMSTANCES THAT AFFECT THE LENGTH OF TIME SERVICES ARE PROVIDED IN DIVERSION CASES (Q7F)

Service has been provided or parents no longer desire service.

Family needs

Protective orders through the court

this time period varies depending on the specific needs of the family involved

Stability of the relatives. How much services the parents are doing and how well they are doing. If there is court involvement after the fact, i.e. Protective Orders.

distance, problems with the placement

Placement disruptions, additional abuse/neglect/court intervention

Family's and/or child's response to services; level of risk of the presenting issues

We have had cases that took much longer as we were providing case management until the completion of lengthy substance abuse treatment

The diversion family's ability to manage independent of the agency. Any positive changes with the prior caretaker.

Length of time it takes for family to stabilize and assume responsibility for the child can be different in various situations.

Based on the needs of the recipients and services available.

Time frame for completion of specified classes (i.e. parenting, SA)

Strengths and supports of the family and resources.

Availability of services, and the type of abuse and neglect.

Where the family resides after the child is placed with relatives, where the relative lives, the families acceptance of services.

completion of services, voluntary termination of services

It varies depending on the situation. But often the family will stabilize and no longer need services.

Lack of cooperation from family and/or youth; Lack of appropriate funding.

Court involvement, parental participation

Court hearings in which custody is periodically reviewed.

the original caretaker's ability to provide a safe and stable environment for the child- usually involves court action and decisions

Lack of staff and financial resources

The needs of the family

none

Parental cooperation; availability of services in area; there are limited substance abuse services in our locality

Court involvement

How the family is thriving and safety of the child or children involved.

stability of the placement and needs of the children

progress of the family

If the child leaves the county to live with another relative, the average length of time maybe reduced.

families willingness to receive services

If child remains in local area and if caretakers need assistance

The needs of the individual situation/family.

Amount of time family is in our jurisdiction, or the child is out of the home.

Assessed needs of child and family

child safety and family stability

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Depends on whether the child will be returning to the parent based on their completion of services

TABLE 123: CIRCUMSTANCES THAT LEAD TO CLOSING A CASE OR STOP PROVIDING SERVICES IN DIVERSION CASES (Q7G1-Q7G6)

		Percent of Respondents
Circumstance	Number	(n=93)
Diversion family no longer needs/requests services	86	92.47
Child returned to original caretaker	57	61.29
Birth family leaves locality with child	38	40.86
Other Circumstances	14	15.05
Agency loses track of family	12	12.90
Necessary internal agency policy/restrictions	7	7.53

TABLE 124: OTHER CIRCUMSTANCES THAT LEAD TO CLOSING A CASE OR STOPPING SERVICES IN DIVERSION CASES (Q7G_TEXT)

ongoing compliance with services

Until risk is removed

successful completion of services

Clients' Request

The diversion family applies for and is granted custody and no other services are needed or requested.

conclusion of court ordered involvement

court orders no additional involvement

Court action

custody given to a relative by the Court

Stability of placement - whatever that looks like.

risk is low

Transfer of custody

Services completed; child no longer at risk.

FAPT/CSA FUNDING

TABLE 125: NUMBER OF AGENCIES THAT BRING PREVENTION CASES TO FAPT FOR FUNDING (Q8)

Does agency bring prevention cases to FAPT?	Freq.	Percent	Cum.
Yes No	101 11	90.18 9.82	90.18 100.00
Total	112	100.00	

Table 126: Circumstances where prevention cases are brought to FAPT for funding (Q8a1-Q8a3)

Circumstance	Number	Percent of Respondents (n=102)
At risk of FC from initial/recurring maltreatment	93	91.18
At risk of FC from CHINS designation	93	91.18
At risk of FC for other reason	38	37.25

TABLE 127: REASONS WHERE PREVENTION CASES ARE BROUGHT TO FAPT (IF NOT CHINS OR MALTREATMENT) (Q8a_text)

lack of sufficient funding from other sources

Court ordered foster care

Court ordered services/placements

when DSS is put on notice for possible foster care placement on a child on probation or relief of custody

No past experience, but would if situation arises

Need for treatment and services for emotional, behavioral and mental health problems.

custodial petition for relief of custody

Our locality has a very involved FAPT Team which encourages any and all foster care prevention cases to either come through them or have a Family Partnership Our department receives a lot of referrals for FPM meetings through our agencies represented at FAPT

delinquency

Parents requesting services or private custody matters where agency put on notice for foster care due to family chaos.

neglect/abuse

rent, electric bills, counseling services if client does not have insurance, fencing for young special needs children, emergency medication for parent or child, exterminator services, outside Johns, garbage disposal, mental health evaluations, substance abuse treatment, emergency medical supplies, temporary housing, day care, car repair

Wants child out of the home but no family members willing/able to take child in.

delinquency, custody disputes

All Mandated and Foster care cases are presented at FAPT

Family request

Relief of custody request when no services have been rendered to stabilize the family.

Court ordered family to FAPT, school concerns with child with emotional/behavior problems

high risk based on risk assessment prevention as mandated services

Truancy, Mental Health

court ordered custody and delinquency cases

education issues causing behavior issues in the home

Persons filing to be relieved of custody; service related needed issue where parents can't afford service due to economy.

Child in need of treatment for mental/behavioral issues

delinquency, truancy

request for relief of custody

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No abuse/neglect or CHINS but family in need of respite

Our judge orders us to provide prevention services for substance abusers (parents), and for delinquents.

Specialized Counseling, mentoring, tutoring, evaluations

Children/youth with significant mental health issues

Parental placements

mental health needs

at risk of placement due to relatives being burnt out, truancy

More kids are undiagnosed by bi-polar tendencies, Vacant District 19 staff persons results in limited referrals for CSA funding.

Homelessness

Delinquency

TABLE 128: HOW DETERMINATION OF CHINS IS MOST OFTEN MADE (Q8B1-Q8B3)

How is determination of CHINS most often made?	Freq.	Percent	Cum.
Made by court Made by FAPT May be either court or FAPT	75 7 19	74.26 6.93 18.81	74.26 81.19 100.00
Total	101	100.00	

Table 129: Comments on Determination of CHINS (Q8B_TEXT)

Cases that come through the CSB are most often determined to be CHINS by FAPT. Parents who have filed the CHINS have the determination made by the court in order to provide funding

Most are Court but our FAPT uses the eligibility checklist to determine a CHINS as well.

We have CHINS cases that are referred by the Court, but most prevention cases come through FAPT without ever having to enter the court system. We also make extensive use of Medicaid funding prior to the family ever having to come through the FAPT process.

Cases brought to FAPT by Court Services may have CHINS determination at FAPT but never a DSS case determined. CHINS (supervision or services) other than by the court

Most often made by Court, but FAPT has had cases brought by Social Workers, GALs, Parents, etc. requesting services. Based on the child and family's needs/circumstances, it could be determined through FAPT. (EX: Prior to petitioning court/getting court involved, parent seeks help through DSS and FAPT determines if they meet Prevention criteria.)

Court refers case it has designated as CHINS. FAPT also makes a determination utilizing the CSA tool available to designate a child as such. Most often it is a non DSS (mental health) case which is designated by FAPT as CHINS.

We accept both equally

Foster Care Prevention

For children who have criminal charges, the designation comes most often through the court. For children who have not had court services contact, the FAPT team usually makes the determination.

CHINS unit could receive a direct referral thus no court involvement

The court determines if a child is placed in the custody of DSS. FAPT only considers the cost for services if needed or if the child is not placed in the custody of DSS, then FAPT can determine which agency takes the lead on the case.

The FAPT may decide a CHINS is necessary if the family has been resistant to voluntary compliance with needed services. Or the Court may determine that a CHINS case needs to be reviewed by the FAPT to determine the best services for the particular needs of the family.

if no court involvement can still access CSA funding if DSS determines child at risk of FC placement

TABLE 130: FUNDING SOURCES REQUIRING FAPT APPROVAL IN THE LOCALITY (Q8c1-Q8c12)

		Percent of Respondents
Funding Source	Number	(n=101)
CSA funds	100	99.01
Foster care funds	38	37.62
Promoting Safe and Stable Families	18	17.82
Independent Living funds	10	9.90
Other funds not listed	7	6.93
Adoption assistance funds	5	4.95
Child Protective Services funds	4	3.96
Local only funds	2	1.98
Medicaid	2	1.98
Grant funded special prevention programs	2	1.98
Budget line item 829 Family Preservation	0	0.00
General relief/assistance for unattached children	0	0.00

TABLE 131: EXAMPLES OF LOCAL ONLY FUNDS NEEDING FAPT APPROVAL (Q8D TEXT)

court orders; immigration issues

Our understanding for local funds is those that must be matched by our county.

TABLE 132: OTHER FUNDING SOURCES REQUIRING FAPT APPROVAL (Q8C_TEXT)

schools, mental health initiatives

Mental Health Initiative funds held by CSB

Foster Care Prevention

FAPT approves certificate of need for Medicaid and Adoption Assistance residential placements

Our MDT oversees the PSSF funding

PSSF

Mental Health Initiative Funds

TABLE 133: PREVENTION FUNDING SOURCES THAT DO NOT REQUIRE FAPT APPROVAL (Q8e1-Q8e10)

		Percent of
		Respondents
Funding Sources	Number	(n=112)
Budget line item 829 Family Preservation	94	83.93
Independent Living funds	86	76.79
Child Protective Services prevention funds	83	74.11
Promoting Safe and Stable Families	81	72.32
Adoption assistance funds	79	70.54
Local only funds	61	54.46
General relief/assistance for unattached children	42	37.50
Grant funded special prevention programs	19	16.96
Community block grants	17	15.18
Other prevention funding sources	10	8.93

TABLE 134: OTHER FUNDING SOURCES THAT DO NOT REQUIRE FAPT APPROVAL (Q8E_TEXT)
Family Preservation
budget line 824/OPS funds; Mental Health Initiative Funds
State and local funds
agency donations to special funds
federal stimulus money for housing, Interfaith Services of Henrico
Private donations to support families in need of support
MDT oversees PSSF
We do not have any IV-e children, so we can't use budget lines.
824

COMMENTS ON DEFINITION OF PREVENTION SERVICES

TABLE 135: DOES THE SURVEY DEFINITION REFLECT THE REALITY OF THE AGENCY'S CURRENT PRACTICE? (Q9)

Definition of prevention			
reflect reality?	Freq.	Percent	Cum.
Yes No	101 11	90.18 9.82	90.18
Total	112	100.00	

TABLE 136: COMMENTS ON CHANGES TO DEFINITION OF PREVENTION (Q9A TEXT)

That operates specific routes at specific times (only during the day) but does not reach all who need it. Basically, the infrastructure does not exist to make providing these services to all who might benefit a realistic goal.

too global we can seek to educate and mitigate

We have no service providers in our locality. The ones we contact do not want to provide services in our area. Also limited funding.

Too broad; anything prior to removal.

The definition of prevention services is fine, however in a small rural agency, resources, staff, and funds are extremely limited. Our agency would like to have workers dedicated to providing these services to the citizens of our county, however currently these services are only provided on a case by case basis or as time allows depending on the specifics on the identified case. We try to participate in as much community outreach, collaboration, and public awareness/education as possible.

I would not change the definition. However, I would change our agency's policies and practices to work within the definition more consistently.

As a small agency, we have neither the time or money to provide meaningful preventions services prior to valid CPS complaint, I wish we could do more outreach, and hope to do more in the future, but we're more than busy providing services to kids in care, as well as the CPS Ongoing folks. We are working well with CSB, SSFG and Project Hope, but it's all AFTER valid CPS.

I don't know that I would change it. Currently, we provide services to prevent multiple moves through foster care programming rather than prevention efforts. However, the definition does provide a strong baseline for prevention program development.

The loss of 824 funding is the BIGGEST issue facing DSS and implementing prevention services/support to clients at risk. Need to work on policy clarification as well.

Not sure. There are some cases that don't meet criteria for on-going cps but you are working with diversion family

Prevention services in this locality should coincide with the definition, but due to a lack of federal/state/local funding, resources are targeted only to those who are identified with founded cps, at risk of out of home placement by DSS and other community partners at the CSA table. the demand is so great in that area that resources are only devoted to those cases and not to primary prevention activities.

APPENDIX A: SURVEY INSTRUMENT

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Purpose of the Survey

Introduction

Purpose of the Survey:

- To identify the range of prevention services that are currently being provided by local agencies throughout child welfare and how they are staffed and funded, and
- To clarify the funding sources used to provide services to prevent the occurrence or recurrence of maltreatment in birth, foster and adoptive families and to prevent foster care placement and re-placement.

Why it is important to complete the survey:

The results of the survey will:

- · Inform the development of guidelines for best practices in all areas of prevention
- Help create a mechanism to acknowledge the successful efforts of localities in preventing abuse/neglect and foster care placements through OASIS
- · Provoke creative thinking in both the practice and funding of prevention services
- · Identify resources that can be used for prevention

There is no intent to create any mandates for the provision of the services described in the survey.

Survey Instructions (Page 1 of 2)

How to complete the survey:

The survey is divided into several sections:

- · Definitions of Prevention
- · Information about Early Prevention Services provided directly by LDSS
- . Information about the use of Family Partnership Meetings for prevention across the child welfare continuum
- Information about funding sources used in Early Prevention, CPS, FC and Adoption
- · Information about Community Resources used to support prevention efforts across the child welfare continuum
- · Information about foster care diversion services
- Information about the circumstances under which cases are brought to FAPT for funding and what funding sources are not part of FAPT

Because the survey asks about all of these services, more than 1 person may need to be involved in answering some of the questions. Each agency has an identified **point person** to complete the survey and gather information from other staff as needed. In most agencies, this is a supervisor. **Only 1 survey per agency should be completed but needs to have the involvement of individuals who are familiar with services provided throughout the child welfare continuum.**

Survey Instructions

Email: beth.jones@dss.virginia.gov

As the agency's point person, you were sent a copy of the survey previously via email. Before you complete the survey:

Please review it carefully to identify whose input is needed in your agency and to identify what, if any questions, you
may have about how to complete it.

Gather the data internally first that you will need before you go on-line. It will be easier and quicker to complete it. The survey should take about 45 minutes to complete.

You may exit the survey (at any point) and your responses will be saved. To re-enter the survey and complete your

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responses, use the link provided in the email invitation. You should return to where you previously left off. However, if your computer does not retain cookies, you may have to scroll forward from the beginning of the survey, but your previous answers will be saved.

The survey should be completed by May 31, 2011.

If you have technical problems with completing the survey, please contact Beth Jones at (804)726-7076 or Email Beth

If you have questions about the content of the survey, please contact Lynne Edwards at (804)726-7807 or Email Lynne

Prevention Definition

Definition of Prevention Services:

Goal of Prevention Services:

Strengthening families by insuring the safety, permanency and well-being of their children

Prevention services are defined as services that prevent:

- . Child abuse/neglect from ever occurring with any caretaker and/or
- . The recurrence of child abuse/neglect with any caretaker and/or
- · Out of home care (including prevention of foster care)

Prevention can be seen on a continuum with services that "help all children thrive" at one end and "prevent harm resulting from maltreatment/removal/and/or multiple moves" on the other end. Services focused on helping children thrive are directed to all families. Services focused on preventing harm through maltreatment and/removal/multiple moves are directed to families at risk of abuse/neglect, where abuse and/or neglect are present, and/or when out of home care is threatened or has been utilized. What distinguishes the services on the continuum is the following:

- Target population
- · Degree of trauma experienced by the child and family
- · Level of intervention by LDSS

Specific definitions of the target population served and the level of intervention by LDSS are described on the next screen.

Definitions (Page 1)

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- Early Prevention Services <u>Prior to a Valid CPS Referral:</u> These services are divided into three (3) categories based on services provided:
- (a) To everyone in the community to strengthen all families (universal or primary) or
- (b) To specific groups of parents who are at risk of maltreatment or family disruption (at risk group) or
- (c) To specific families at risk (at risk parents).
- 2. Prevention of Child Abuse/Neglect & Removal After Receipt of a Valid CPS Referral: Prevention services

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provided to families with a valid referral and suspected or founded abuse/neglect to prevent maltreatment, to prevent recurrence and/or to prevent foster care. Once services are provided, they are most commonly referred to as CPS ongoing services.
3. Prevention of Child Abuse/Neglect & Placement Disruptions <u>After Removal of a Child</u> : Prevention services to potential and approved foster parents, to families where a petition for CHINS or for relief of custody has been filed, to birth parents once a child has come into care or once a child is returned home and to youth 14-21 to prevent abuse/neglect and ensure placement stability.
4. Prevention of Child Abuse/Neglect, Placement Disruptions/ Dissolutions After Adoptive Placement: Prevention services provided to potential and approved adoptive parents and to birth family members who may be in contact with adopted children to prevent abuse/neglect and insure placement stability.
Prevention Continuum
Please see the attached file for the Prevention Continuum. The image will appear on the screen for the on-line survey.
Early prevention services provided by LDSS to general public
Questions # 1-3 ask for information about services provided by the local DSS staff directly in Early Prevention Services (i.e. public education and awareness and services provided to groups or individuals prior to a valid CPS referral.)

(i.e. public education and awareness and services provided to groups or individuals prior to a valid CPS referral.)

Please read the definitions carefully before you respond and refer back to the definitions as needed.

Using the following description of services, which of these are provided by your staff directly:

Early Prevention Services: These are primary prevention services provided before receipt of a valid CPS referral. They are divided into three (3) categories: Prevention services provided to:

1. Universal/Primary - everyone in the community to strengthen all families

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- 2. Selective/Secondary specific groups of parents who are at risk of maltreatment or family disruption
- 3. Selective/Secondary specific families at risk who are at risk of maltreatment or family disruption

Read the definition below and then check YES if you directly provide any of the services:

Category 1. **Universal or Primary prevention strategies** are directed to the general population (both children and adults) with the goal of strengthening families and other caretakers (e.g. child care providers, relatives, etc.) and preventing child maltreatment from ever occurring. These services are often referred to as Community Outreach or Public Education and Awareness activities. These are services provided to everyone, not directed to particular group or parent.

1. Do you provide these services?	
Yes [Continue]	
No [Skip to Question 2]	
Early prevention services provided by LDSS to general public	
Early prevention services provided by LDSS to general public	
Early prevention services provided by LDSS to general public	

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Answer the following questions for the unive	
provides directly to the general public. Do no	
community based organizations.	
1a. Check all of the universal early prevention	n services you <u>directly provide</u> from the list:
Public service announcements	Information and referral to the general public (not to specific families)
Distribution of parent education and/or child development information/materials to the general public	Distribution of information and/or materials to children to
Providing information on available services to the general	increase their safety
public	Community collaboration around issues related to prevention,
Parent support groups (open to anyone in the community and	Attendance at Hugs and Kisses performances
focused on supporting parents)	Training to community based organizations/providers, (e.g., Boy
Parent education groups (open to anyone in the community and focused on providing information on topics of interest to all parents)	Scouts, child care providers, school personnel)
Parent training (open to anyone in the community and focused	Community activities conducted during Child Abuse Prevention month
on building skills of parents)	
Public speaking (at community events or to groups within the community)	
Other public education and awareness efforts	
Early prevention services provided by L 1b. Check all staff who provide these univers (not to specific families)	
Intake worker	
Staff devoted primarily to prevention (e.g., family stabilization stat	ff)
CPS investigative worker	
CPS family assessment worker	
CPS on-going services worker	
Foster care worker	
Adoption worker	
Generic worker	
Other (please specify)	
Same (heave show))	

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Early prevention services provided b	y LDSS to general public
	hom you collaborate for funding and/or services on services (public education and awareness
Prevent Child Abuse Virginia (state or local affiliate)	OB/GYN clinics
Schools	Other physicians and clinics
Local or regional coalitions	Community based resources (churches, etc.)
Parent groups	Local CSA
Home visiting programs	Smart Beginnings
Health department	Foundations and Corporations
Other groups	
1d. Check all the sources of funding you observices: Grant funding [Continue to Question 1d(1)] 100% Local only funds Safe and Stable Families (budget line item 868/title IVB Sull United Way Community block grants Community resources (e.g., churches, Salvation Army, etc.) Other (please specify)	
Early prevention services provided by 1d(1). Please provide grant funding title at Early prevention services provided by	and source:

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1e. Check the language(s) in which you print materials:
English
Spanish
Other (please specify)
1f. Do you use volunteers to assist in providing these <u>universal early prevention</u> services?
Yes [Continue to Question 1g]
No [Skip to Question 2]
Early prevention services provided by LDSS to general public
1g. How do you use the volunteers?
ig. now do you use the volunteers?
Early prevention services provided by LDSS to high risk groups
Read the definition below and then check YES if you directly provide any of the services:
Category 2. Selective early prevention strategies to a category or group of parents or other caretakers with specific risk factors (e.g. parents groups for incarcerated fathers, parent information and/or training for parents who were prior victims of abuse, etc.) or groups of children with specific risk factors (e.g. pregnant teens, etc.) to prevent child maltreatment from occurring in that group. These are NOT services provided to individual families or the general public.
2. Do you provide these services?
Yes [Continue]
No [Skip to Question 3]
Early prevention services provided by LDSS to high risk groups

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Answer the following questions for selective early prevention services your staff provides
directly to high risk groups. Do not include services that are only provided by community
based organizations.
2a. Identify which of the following groups you target for services: (Check all that apply)
Fathers
Parents with disabilities
Parents with children with disabilities
Non-English speaking parents
Incarcerated parents
Pregnant teens
Parenting teens
Single parents
Low-income families
Other targeted groups
Early prevention services provided by LDSS to high risk groups
Larry prevention services provided by 2500 to mgm risk groups
2b. Check all of the selective early prevention services you directly provide to high risk
groups:
Distribution of parent education and child development materials to targeted groups
Information on available services distributed to targeted groups, not just the general public
Parent support groups for high risk groups, not to the general public
Parent education for high risk groups (e.g., financial, health, child development, working with school systems, behavior management,
family relationships)
Parent training for high risk groups
Public speaking for high risk groups
Financial assistance
Translator services
Other prevention services targeted to high risk groups

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c. Check all staff who provide selective early prevention services to high risk groups (no
client specific)
Family stabilization or other staff devoted primarily to prevention
CPS investigative worker
CPS family assessment worker
CPS on-going services worker
Foster care worker
Adoption worker
Generic worker
Other Worker
2d. Check all the funding sources used to purchase these <u>selective early prevention</u> services for <u>high risk groups</u> . This does not include services to specific parents.
Grant Funding [Continue to Question 2d(1)]
CSA funds
Medicaid
Safe and Stable Families (budget line item 886/title IVB Subpart 2)
Budget line item 829-Family Preservation (SSBG)
100% Local only funds
Adoption Assistance
United Way
Community block grants
Community resources (e.g., churches, Salvation Army, etc.)
Foundations and Corporations
Other
arly provention convices provided by LDSS to high rick groups
arly prevention services provided by LDSS to high risk groups

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2d(1). Please provide grant funding title and source:
Early prevention services provided by LDSS to high risk groups
2e. Do you use volunteers to assist in providing these selective early prevention services to families?
Yes [Continue to Question 2f]
No [Skip to Question 3]
Early prevention services provided by LDSS to high risk groups
2f. How do you use these volunteers?
Early prevention services provided by LDSS to high risk specific families
Read the definition below and then check YES if you directly provide any of the services:
Category 3. Selective or Secondary prevention strategies to specific parents referred by courts, FAPT, schools, referrals from CPS, domestic violence shelters, hospitals, and others or self-referred to prevent child maltreatment and/or out of home care. This includes services to parents or children who may have been the subject of a CPS referral that was determined to be invalid. Serving the parent could be voluntary or mandated or court ordered.
3. Do you provide any of these services directly?
Yes [Continue]
No [Skip to Question 4]
Early prevention services provided by LDSS to high risk specific families

. Check all sources below from which you	receive referrals of these families.
Head Start	Law enforcement
Schools	Homeless shelters
Courts	Child Advocacy Centers
Hospitals	Domestic violence shelters
Medical professionals (not a part of hospital staff)	Eligibility staff within your agency
Public mental health	CPS staff within your agency
Private mental health	Other staff within your agency
Guardian Ad Litems (GALs)	Churches
Court-Appointed Special Advocate (CASA) volunteers	Other community based nonprofit organizations
Community Service Boards (CSBs)	Self-referral by family
Other	
rly prevention services provided by nswer the following questions for service ervices that are only provided by commun	s your staff provides directly. Do not include
nswer the following questions for services rvices that are only provided by commun	s <u>your staff provides directly</u> . Do not include hity based organizations. ion family support services you directly provide
nswer the following questions for services rvices that are only provided by commun	s <u>your staff provides directly</u> . Do not include hity based organizations. ion family support services you directly provide
swer the following questions for services rvices that are only provided by commun. Check all of the selective early preventispecific families at risk PRIOR TO a valid Case management/coordination Case management/	s <u>your staff provides directly</u> . Do not include hity based organizations. ion family support services you directly provide
swer the following questions for services rvices that are only provided by commun. Check all of the selective early preventi specific families at risk PRIOR TO a valid Case management/coordination	s your staff provides directly. Do not include nity based organizations. ion family support services you directly provide CPS referral:
nswer the following questions for services ervices that are only provided by communo. Check all of the selective early preventices specific families at risk PRIOR TO a valid Case management/coordination Information and referral LDSS funded respite care	s your staff provides directly. Do not include nity based organizations. on family support services you directly provide CPS referral: Finding relatives and other individuals to enhance parent support
nswer the following questions for services rivices that are only provided by communo. Check all of the selective early preventices specific families at risk PRIOR TO a valid Case management/coordination Information and referral LDSS funded respite care Transportation	s your staff provides directly. Do not include nity based organizations. on family support services you directly provide CPS referral: Finding relatives and other individuals to enhance parent support Children's services within domestic violence prevention or treatment programs Advocacy on behalf of the family within the community to
nswer the following questions for services rivices that are only provided by communo. Check all of the selective early preventices specific families at risk PRIOR TO a valid Case management/coordination Information and referral LDSS funded respite care Transportation Counseling by LDSS	s your staff provides directly. Do not include nity based organizations. ion family support services you directly provide CPS referral: Finding relatives and other individuals to enhance parent support Children's services within domestic violence prevention or treatment programs
nswer the following questions for services rivices that are only provided by communos. Check all of the selective early preventices specific families at risk PRIOR TO a valid Case management/coordination Information and referral LDSS funded respite care Transportation Counseling by LDSS LDSS funded home repair	s your staff provides directly. Do not include nity based organizations. Ion family support services you directly provide CPS referral: Finding relatives and other individuals to enhance parent support Children's services within domestic violence prevention or treatment programs Advocacy on behalf of the family within the community to secure services and support
nswer the following questions for services that are only provided by communos. Check all of the selective early preventices that are only provided by communos. Check all of the selective early preventices specific families at risk PRIOR TO a valid Case management/coordination Information and referral LDSS funded respite care Transportation Counseling by LDSS LDSS funded home repair Services to targeted children to increase protective factors	s your staff provides directly. Do not include nity based organizations. Ion family support services you directly provide CPS referral: Finding relatives and other individuals to enhance parent support Children's services within domestic violence prevention or treatment programs Advocacy on behalf of the family within the community to secure services and support Mentoring
nswer the following questions for services rivices that are only provided by communos. Check all of the selective early preventices specific families at risk PRIOR TO a valid Case management/coordination Information and referral LDSS funded respite care Transportation Counseling by LDSS LDSS funded home repair	s your staff provides directly. Do not include nity based organizations. Ion family support services you directly provide CPS referral: Finding relatives and other individuals to enhance parent support Children's services within domestic violence prevention or treatment programs Advocacy on behalf of the family within the community to secure services and support Mentoring Other financial assistance used for prevention
nswer the following questions for services that are only provided by communos. Check all of the selective early preventices that are only provided by communos. Check all of the selective early preventices specific families at risk PRIOR TO a valid Case management/coordination Information and referral LDSS funded respite care Transportation Counseling by LDSS LDSS funded home repair Services to targeted children to increase protective factors	s your staff provides directly. Do not include lity based organizations. Ion family support services you directly provide CPS referral: Finding relatives and other individuals to enhance parent support Children's services within domestic violence prevention or treatment programs Advocacy on behalf of the family within the community to secure services and support Mentoring Other financial assistance used for prevention LDSS funded child care

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arly prevention services provided by LDSS to high ri	sk specific families		
3c. Using a scale from 1 to 5, rank the 5 most frequently provided <u>selective early</u> <u>prevention</u> services you <u>provide directly to specific families at risk</u> . from the list of those you checked on the previous screen. (1 is most frequent and 5 is less frequent)			
ase management/coordination			
formation and referral			
DSS funded respite care			
ransportation			
ounseling by LDSS			
OSS funded home repair			
ervices to targeted children to increase protective factors			
evelopmental screening for children			
nding relatives and other individuals to enhance parent support			
hildren's services within domestic violence prevention or treatment programs			
dvocacy on behalf of the family within the community to secure services and support			
entoring			
ther financial assistance used for prevention			
OSS funded child care			
omestic violence prevention			
ranslator services			
ther prevention services targeted to a high risk group or an individual family referred to LDSS			
arly prevention services provided by LDSS to high ri	sk specific families		

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3d.	Check all staff who provide <u>selective early</u> prevention services to <u>specific families at</u>
risl	g control of the cont
	Intake worker
	Family stabilization or other staff devoted primarily to prevention
	CPS investigative worker
	CPS family assessment worker
	CPS on-going services worker
	Foster care worker
	Adoption worker
	Generic worker
	Benefit program worker (VIEW, TANF,etc.)
	Other
3e.	Check all the funding sources used to provide these selective early prevention
	Check all the funding sources used to provide these selective early prevention vices to high risk families. This does not include services to groups.
	vices to high risk families. This does not include services to groups.
	vices to high risk families. This does not include services to groups. Grant Funding [Continue to 3e(1)]
	vices to high risk families. This does not include services to groups. Grant Funding [Continue to 3e(1)] CSA funds
	vices to high risk families. This does not include services to groups. Grant Funding [Continue to 3e(1)] CSA funds Medicaid
	vices to high risk families. This does not include services to groups. Grant Funding [Continue to 3e(1)] CSA funds Medicaid Safe and Stable Families (budget line item 866/title IVB Subpart 2)
	wices to high risk families. This does not include services to groups. Grant Funding [Continue to 3e(1)] CSA funds Medicaid Safe and Stable Families (budget line item 886/title IVB Subpart 2) Budget line item 829-Family Preservation (SSBG)
	wices to high risk families. This does not include services to groups. Grant Funding [Continue to 3e(1)] CSA funds Medicaid Safe and Stable Families (budget line item 868/title IVB Subpart 2) Budget line item 829-Family Preservation (SSBG) 100% Local only funds
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VDSS Prevention Survey_Print Version
3e(1). Please provide grant funding title and source:
Early prevention services provided by LDSS to high risk specific families
3f. Do you use volunteers to assist in providing these services?
Yes [Continue to Question 3g]
No [Skip to Question 4]
Early prevention services provided by LDSS to high risk specific families
3g. How do you use the volunteers?
Early Prevention Services
You have completed the section on Early Prevention Services provided directly by your agency.
Use of Family Partnership Meetings

VDSS Prevention Survey_Print Version
The question below asks for information about the use of Family Partnership Meetings in
early prevention, CPS, foster care, and adoption.
4. For which service categories have you used a family partnership meeting within the last year? (check all that apply) Families at risk of child abuse/neglect or out of home care prior to a CPS valid referral Families who have a valid referral of child abuse/negelect Foster families at risk of abuse/neglect Foster families at risk of placement disruption Youth in independent living arrangement at risk of physical harm or placement disruption A child aging out of foster care who may be at risk of physical harm, not in Independent Living An adopted child and their family at risk of disruption or dissolution None of the above
Other
Other
Family Partnership Meetings
You have completed the section on Family Partnership Meetings.
Funding sources for CPS, FC, Adoption

VDSS Prevention Survey_Print Version
The question below asks about funding sources used for prevention in child protective services, foster and adoption.
5. Check all the funding sources that can be used to purchase prevention services for: • Child Abuse/Neglect And Removal After Receipt of a Valid CPS Referral • Child Abuse/Neglect & Placement Disruptions After Removal of a Child • Child Abuse/Neglect Blacement Disruptions/ Disselutions After Adentive Blacement
Child Abuse/Neglect, Placement Disruptions/ Dissolutions After Adoptive Placement Grant Funding [Continue to Question 5a]
CSA funds
Medicaid
Safe and Stable Families (budget line item 866/title IVB Subpart 2)
Budget line item 829-Family Preservation (SSBG)
100% Local only funds
Adoption Assistance
ILP (Independent Living Program)
United Way
Community block grants
Community resources (e.g., churches, Salvation Army, etc.)
Foundations and Corporations
Other
Funding sources for CPS, FC, Adoption
5a. Please provide grant funding title and source:
Funding sources for CPS, FC, Adoption
You have completed the section on funding sources for CPS, FC, and Adoption.
Services provided by community based resources

VDSS Prevention Survey Print Vers	sion		
VDSS Prevention Survey_Print Version The question below refers to services provided by community based resources to which			
the agency refers, not to services directly p	-		
the agency refers, not to services unectry p	novided by the local department.		
6. Which of the following community based	resources are utilized to provide prevention		
services <u>in any program area</u> (Early Preven	tion, CPS, foster care, adoption)? (Check all		
that apply)			
None (skip to question 7)	Private health providers		
Healthy Families providers	Public mental health providers (e.g., community services boards)		
Other home visiting providers	Private mental health providers		
Part C Early Childhood Intervention	Respite care providers		
Other Early Childhood Intervention programs	Schools		
Early Head Start (birth to 3)	Churches		
Head Start (3 to 5 years)	Mentoring program providers		
VA Cooperative Extension Programs (including 4-H)	Domestic violence prevention providers		
Parent Support group providers	Sexual Assault Centers		
Workshops and trainings provided by community groups	Child Advocacy Centers		
Intensive in-home service providers	Foundations and corporations		
Public health providers	Stop Child Abuse Now (SCAN)		
Other (not listed)			
Services provided by community base	ed resources		

VDCC Provention Curvey Print Version
VDSS Prevention Survey_Print Version
6a. Please select the parent support group providers that are utilized in your community to
provide prevention services in any program area (Early Prevention, CPS, foster care,
adoption): (Check all that apply)
No parent support groups are utilized for prevention services
Circle of Parents
Other parent support groups for the general public
Other parent support groups for at-risk families
School based support groups for any parent
School based support groups for at risk parents
Mental health based support groups for any parent
Mental health based support groups for at risk parents
Other parent support groups provided by other community partners
Services provided by community based resources
6b. Please select the population(s) targeted for <u>workshops</u> and <u>trainings</u> provided by
6b. Please select the population(s) targeted for <u>workshops and trainings provided by</u> <u>community groups</u> : (Check all that apply)
community groups: (Check all that apply)
community groups: (Check all that apply) There are no workshops or trainings provided by community groups in my locality
community groups: (Check all that apply) There are no workshops or trainings provided by community groups in my locality The general public
community groups: (Check all that apply) There are no workshops or trainings provided by community groups in my locality The general public High-risk families
Community groups: (Check all that apply) There are no workshops or trainings provided by community groups in my locality The general public High-risk families Families where abuse and neglect has occurred
Community groups: (Check all that apply) There are no workshops or trainings provided by community groups in my locality The general public High-risk families Families where abuse and neglect has occurred Families where domestic violence is present or suspected Families whose children have been removed
Community groups: (Check all that apply) There are no workshops or trainings provided by community groups in my locality The general public High-risk families Families where abuse and neglect has occurred Families where domestic violence is present or suspected Families whose children have been removed Foster families
Community groups: (Check all that apply) There are no workshops or trainings provided by community groups in my locality The general public High-risk families Families where abuse and neglect has occurred Families where domestic violence is present or suspected Families whose children have been removed
Community groups: (Check all that apply) There are no workshops or trainings provided by community groups in my locality The general public High-risk families Families where abuse and neglect has occurred Families where domestic violence is present or suspected Families whose children have been removed Foster families Adoptive families
Community groups: (Check all that apply) There are no workshops or trainings provided by community groups in my locality The general public High-risk families Families where abuse and neglect has occurred Families where domestic violence is present or suspected Families whose children have been removed Foster families
Community groups: (Check all that apply) There are no workshops or trainings provided by community groups in my locality The general public High-risk families Families where abuse and neglect has occurred Families where domestic violence is present or suspected Families whose children have been removed Foster families Adoptive families
Community groups: (Check all that apply) There are no workshops or trainings provided by community groups in my locality The general public High-risk families Families where abuse and neglect has occurred Families where domestic violence is present or suspected Families whose children have been removed Foster families Adoptive families Community Partners You have completed the section on services provided by community partners.
community groups: (Check all that apply) There are no workshops or trainings provided by community groups in my locality The general public High-risk families Families where abuse and neglect has occurred Families where domestic violence is present or suspected Families whose children have been removed Foster families Adoptive families Community Partners

VDSS Prevention Survey_Print Version
continuum.
Definition of Foster Care Diversion Activities:
Facilitating an informal alternate living arrangement to prevent removal of the child and entry into foster care.
7. Do you facilitate alternate living arrangements with relatives or non-relatives for a child
at risk of removal and entering foster care? (the families accepting these children are
referred to below as "diversion families")
Yes [Continue to Question 7a]
No [Skip to Question 8]
Foster care diversion services
7a. Estimate the number of children diverted from foster care through alternative living
arrangements ONLY in SFY 2010: (This excludes children who have been provided foster
care prevention services such as on-going CPS, but did not move to a "diversion family.")
O 1-5
6-10
O 11-15
O 16-20
O 21-30
31-40
<u>41-50</u>
More than 50
Foster care diversion services
7b. Do you directly provide services to any of the "diversion families" and/or birth families
involved after you have facilitated an informal out of home alternative living arrangement?
No - we are unable to provide services at this time to the "diversion families" and/or birth families after an alternative living arrangement is made by the birth family [Skip to Question 8]
Yes - we provide some services to "diversion families" and/or birth families after an alternative living arrangement is made by the birth family [Continue]
Comments

VDSS Prevention Survey_Print Version
Foster care diversion services
7c. To whom do you <u>directly</u> provide services in diversion cases? (Do not include services provided by other agencies/organizations) (Check all that apply)
Original caregivers (usually but not always the birth parents)
Relative or non-relative caregivers who are providing the new living arrangement ("diversion families") Child
Others
Foster care diversion services
7d. Which of the following types of services do you provide in diversion cases? (Check all
that apply)
Case management
Referral for services within your agency (e.g., referral for TANF, Medicaid, etc.)
Referral for services to providers outside your agency
Other
7e. What is the average length of time you directly provide these services?
1-2 months
34 months
5-6 months
More than 6 months
7f. What (if any) circumstances impact this time period?
Foster care diversion services

VDSS Prevention Survey_Print Version
7g. Under what circumstances do you most often close the case or stop providing
services? (Check all that apply)
Child returned to the original caretaker
"Diversion family" no longer needs or requests services
Birth family leaves the locality with the child
Agency loses track of the family
Necessary internal agency policy/restrictions on the duration of services in these situation
Other
Oner
Foster Care Diversion
You have completed the section on foster care diversion.
FAPT/CSA Funding
8. Does your agency bring prevention cases to the Family Assessment and Planning Team (FAPT) for funding? Yes [Continue] No [Skip to Question 9]
FAPT/CSA Funding
The questions below relate to prevention cases that are brought to the Family Assessment and Planning Team (FAPT) for funding.
8a. Under what circumstances are prevention cases brought to FAPT for funding? (Check
all that apply)
At risk of foster care placement as a result of initial or recurring maltreatment
At risk of foster care placement as a result of a child designated as CHINS
At risk of foster care placement as a result of something other than maltreatment or CHINS (list the reasons)
FAPT/CSA Funding

VDSS Prevention Survey Print Version
8b. For those cases at risk of foster care placement as a result of a child designated as
CHINS, select how the determination is most often made:
Determination of CHINS is made by Court
Determination of CHINS is made by FAPT
May be either, depending on the circumstances of the case (explain)
Comments
FAPT/CSA Funding
8c. For which funding sources is FAPT approval needed in your locality? (Check all that
apply)
Local only funds [Continue to Question 8d]
Child Protective Services funds
Foster care funds
Independent Living funds
Adoption Assistance funds Reporting Safe and Stable Equilies (RSSE)
Promoting Safe and Stable Families (PSSF) CSA funds
Budget line item 829-Family Preservation (SSBG)
General relief/assistance for unattached children
Medicaid
Grant funded special prevention programs
Other funds not listed here
FAPT/CSA Funding
8d. If you selected "local only funds" as needing FAPT approval, please provide 2
examples:
FAPT/CSA Funding

VDSS Prevention Survey_Print Version
8e. What prevention funding sources outside of CSA funds are controlled by your locality
and for which FAPT approval is not needed?
Child Protective Services prevention funds
Independent Living funds
Adoption Assistance funds
Promoting Safe and Stable Families (PSSF)
Budget line item 829-Family Preservation (SSBG)
General relief/assistance for unattached children
Community block grants
Local only funds
Grant funded special prevention programs
Other
FAPT/CSA Funding
You have completed the section on FAPT/CSA Funding.
Comment on definition
The final question is to get some feedback about how we defined prevention for the purposes of this survey.
We have used the following definition of prevention for this survey:
Prevention services are defined as services that prevent: • child abuse/neglect from ever occurring with any caretaker and/or • the recurrence of child abuse/neglect with any caretaker and/or • out of home care (including prevention of foster care)
Prevention can be seen on a continuum with services that "help all children thrive" at one end and "prevent harm resulting from maltreatment/removal/and/or multiple moves" on the other end. Services focused on helping children thrive are targeted to all families. Services focused on preventing harm through maltreatment and/removal/multiple moves are targeted to families at risk of abuse/neglect, where abuse and/or neglect are present, and/or when out of home care is threatened or has been utilized. What distinguishes the services on the continuum is the following: • Target population • Degree of trauma experienced by the child and family • Level of intervention by LDSS

VDSS Prevention Survey_Print Version
9. Does this definition reflect the reality of your agency's current practice in prevention?
Yes [End of Survey]
No [Continue to Question 9a]
Comment on definition
9a. If no, how would you change it?
Final Page
You have now completed the VDSS Prevention Survey. We thank you for your time and efforts in completing the survey.
Please click on Done to make sure your answers are recorded.

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